

Date:		PLEASE PRINT		
	To (New Office): _ Address: City, State, Zip:			
	License is no longer hanging in a REALTOR® office.			
	License is inactive, and will no longer be in the real estate profession.			
	Change of: Home address:			
_		ated/Managing Brok	Fax #: _(
	-	G Firm	☐ Home	
	Preferred Fax:			
	Broker has given notice to: Association of REALTORS® NWMLS License Department (license mailed in)			
	Other:			
Thanks for changing your database accordingly				
(Please Print Name) SKCR Member #:				
			NWMLS LAG #:	

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