

LICENSEE CHANGE REQUEST FORM

Return the completed form and all attachments to the **KANSAS REAL ESTATE COMMISSION, #3 Townsite Plaza, Suite 200, 120 SE 6th Ave., Topeka, KS 66603-3511. Fax: 785-296-1771. Phone: 785-296-3411.**

Mark all changes requested. Note: Section 1 below **must** be completed in order to process **any** change.

- | | |
|---|---|
| <input type="checkbox"/> Residence Address Change (Section 1) | <input type="checkbox"/> Reactivation of License (Sections 1 & 4) |
| <input type="checkbox"/> Transfer of License (Sections 1 & 2) | <input type="checkbox"/> Licensee Name Change (Sections 1 & 5) |
| <input type="checkbox"/> Inactive Status (Sections 1 & 3) | |

SECTION 1

(Please print or type)

LICENSEE NAME: _____ LICENSE #: _____

RESIDENCE ADDRESS: _____
STREET OR RR CITY STATE ZIP CODE

RESIDENCE PHONE: () CELL PHONE: ()

E-MAIL ADDRESS: _____

LICENSEE SIGNATURE: _____ DATE: _____

SECTION 2

TRANSFER INSTRUCTIONS

1. Licensee, terminating broker and new supervising/branch broker must complete and sign the section below.
2. Attach the wall license to this change request and submit to the KREC with the **\$15** transfer fee.

Note: Transfer of license applies whether moving from one company to another or from one branch to another. The transfer will be effective on the date received by KREC.

This is to certify that the above shown licensee has requested a transfer of license:

FROM: _____
TERMINATING COMPANY NAME COMPANY #

TO: _____
NEW COMPANY NAME COMPANY #

NEW COMPANY ADDRESS ()
NEW COMPANY PHONE

()
NEW COMPANY FAX

SIGNATURE OF LICENSEE DATE SIGNED

SIGNATURE OF TERMINATING BROKER DATE SIGNED

SIGNATURE OF NEW SUPERVISING/BRANCH BROKER DATE SIGNED

SECTION 3

INACTIVE STATUS INSTRUCTIONS

1. Licensee and Broker must complete the section provided below and sign.
2. Attach the wall license(s) to the change request and **immediately** return to the Kansas Real Estate Commission.
3. No fee is required to place a license on inactive status.

Note: A license must still be converted or renewed even while on inactive status.

DATE OF TERMINATION SIGNATURE OF LICENSEE SIGNATURE OF SUPERVISING/BRANCH BROKER

LICENSEE NAME _____

LICENSE # _____

SECTION 4

REACTIVATION INSTRUCTIONS

1. Licensee and Broker must complete the section provided below and sign.
2. All hours required for reactivation must be on record in order to process this request.
3. Submit the completed application and **\$15** reinstatement fee to the KREC.

1. Did licensee renew without education at his/her last renewal? YES NO Last Renewal Date: _____
If answered "yes", proof of completion of those hours must be on record with the Commission prior to the processing of this application.

2. Has the license been on inactive status for more than two years? YES NO Inactive Date: _____
If answered "yes", continuing education totaling six hours for each full year the license has been on inactive must be completed prior to activation. After 5 years or more on inactive status, the licensee must also pass the Kansas licensure exam.

3. Within the past five years, has licensee been convicted of a criminal offense or is there any criminal charge now pending against the licensee (other than minor traffic violations?) YES NO

4. Within the past five years, has licensee had a real estate or other type of professional license or certification denied, revoked, or suspended by Kansas or any other jurisdiction? YES NO

COMPANY NAME _____

COMPANY # _____

COMPANY ADDRESS _____

()
COMPANY PHONE _____

SIGNATURE OF SUPERVISING/BRANCH BROKER _____

()
COMPANY FAX _____

I request my license be activated under the company shown above.

SIGNATURE OF LICENSEE

SECTION 5

LICENSEE NAME CHANGE INSTRUCTIONS

As each licensee's expiration date is based on the first letter of his/her last name, a request for name change may affect the expiration/renewal due date. Call (785) 296-3413 or e-mail norma.rolfe@krec.state.ks.us for the prorated license fee, if applicable.

1. Complete the section provided below and sign.
2. If the license is currently on active status, attach the wall license to this change request and submit to the KREC with any applicable license fee.

LICENSEE'S NEW NAME _____

EFFECTIVE DATE OF CHANGE

SIGNATURE OF LICENSEE

DATE SIGNED