

## LICENSEE STATUS FORM

PREFERRED MAILING ADDRESS ☐ HOME ☐ OFFICE

LICENSING			
Have you ever been licensed in Mississi		☐ Yes ☐ No	Note: Providing false or incomplete information can cause unexpected delays on application processing.
LICENSEE HOME INFORMATION (PLEASE PRINT CLEARLY)			
Name of Licensee			Agent ID
Address			Date of Birth
City/State		Zip	Phone
E-Mail Address			Cell Phone
Real Estate License #			FAX
LICENSEE COMPANY INFORMATION (PLEASE PRINT CLEARLY)			☐ OFFICE ADDRESS CHANGE
Company Name (As Listed on License)			Company ID
Address			Phone
City/State Zip			FAX
LICENSE			
☐ <b>New Licensee</b> Include copy of wall license & REALT	FOR® Packet		Date submitted:
☐ Transferring to Referral Company \$100 fe Include copy of new wall license.			Date on license:
☐ License Returned to MREC			Date submitted:
☐ Transferring to Another Firm \$100 fee to CMR Include copy of new wall license.			Date submitted:
☐ Opening My Own Office Include copy of broker wall license, copy of company license & DR Packet			Date submitted:
MEMBERSHIP STATUS			
☐ Designated REALTOR® ☐ REALTOR® Member ☐ Non-M		☐ Non-Member Lice	ense
☐ Appraiser Non-Member ☐	Appraiser Member	☐ Affiliate	
SIGNATURE			
Broker Signature		Date	
FOR OFFICE USE ON  MLS   Supra   RAMCO	LY ate:	Central Mississippi REAL Central Mississippi MLS,	

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