



STATE OF TENNESSEE
 DEPARTMENT OF COMMERCE AND INSURANCE
 TENNESSEE REAL ESTATE COMMISSION
 500 JAMES ROBERTSON PARKWAY, SUITE 180
 NASHVILLE, TENNESSEE 37243-1151
 www.state.tn.us/commerce/trec
 (615) 741-2273 or (800) 342-4031

T.R.E.C. Form 1.

REVISED 06/01/03

Do not write or mark in the space below.

TRANSFER, RELEASE AND CHANGE OF STATUS FORM

Check appropriate box(es) and complete all required lines of information.

Remit appropriate fee for each box checked.

Amount remitted \$ _____

- A. Transfer to new firm (1 thru 8) \$25.00
- B. Change of licensee name (1,2,3, & 7) \$10.00
- C. Change of home address of licensee (1, 7 & 8) NO CHARGE
- D. Change of status from inactive or retired to active (1,3,4,6,7&8) \$25.00
- E. Change of status from active to inactive or retired status (1,5,7 & 8) \$25.00
(Licensee must continue to pay renewal fee when due, TCA 62-13-318)
- F. Request duplicate of lost license (1,2,5, & 7) \$10.00
- G. Change of firm name (1 thru 4) \$10.00
(A form and fee are required from each licensee and the PB must file new Firm application form)
- H. Change of firm business address (2, 4a & 5) \$50.00 or Firm Mailing Address (2,4b,&5) \$ 50.00 (Per change regardless of number of affiliates)
Firms may add a P.O. Box for mailing purposes only. A mailing address cannot be another street address or home address.
- I. Change or Upgrade of firm's principal broker (1,2,5,6) \$25.00
- J. Principal Broker release of affiliated licensee (1,2, & 5) NO CHARGE, Licensee will be placed in problem status, SEE additional information on page 2 of this form.

I request T.R.E.C. process as indicated above

TYPE OF LICENSE: (circle) Affiliate Broker Broker Firm Timeshare Salesperson Vacation Lodging

1.	Licensee's Name	Home Phone Number	E-Mail Address	License/File ID Number
2.	Current Firm Name	Firm Phone Number	E-Mail Address	Current Firm File ID Number
3.	New Firm/Licensee Name	New Firm Phone Number	E-Mail Address	New Firm File ID Number
4.(a)	New Firm Street Address			
	City	State	Zip Code	
4.(b)	Firm Mailing Address (P.O. Box only)			
	City	State	Zip Code	
ORIGINAL SIGNATURES ONLY, PROVIDE ALL INFORMATION AND DATES				
5.	Current or Releasing Principal Broker's Signature	PB License (File I.D.)Number	Date of Change or Release	
6.	New Principal Broker's Signature	PB License (File I.D.)Number	Date	
7.	Licensee's Signature	Date		
8.	Licensee's Home Mailing Address			
	City	State	Zip Code	

PLEASE READ REVERSE OF THIS FORM FOR IMPORTANT INFORMATION AND INSTRUCTIONS

If this form does not have the information printed on the reverse, you can obtain a copy of both sides by contacting the TREC office or web site at: www.state.tn.us/commerce/trec IN0857(Rev. 06/2003)