

Michigan Department of Consumer & Industry Services
Bureau of Commercial Services
Licensing Division
BOARD OF REAL ESTATE
P.O. Box 30243, Lansing, MI 48909
517-241-1781
www.michigan.gov/commerciallicensing

OFFICE USE ONLY	
ID#	65-01
Date Approved	
Approved By	
License Returned	<input type="checkbox"/> Yes <input type="checkbox"/> No

REAL ESTATE SALESPERSON TRANSFER APPLICATION

AUTHORITY: P.A. 299 of 1980, as amended
COMPLETION: Mandatory
PENALTY: Failure to complete may result in denial of your application

FEE \$10.00
FEE IS NON-REFUNDABLE

SECTION 1 - INSTRUCTIONS AND INFORMATION

1. Print in black ink or type all responses to Sections 2A below and 2B and Section 3 on side 2.
2. This form is to be used only by a salesperson who either holds a current active salesperson license or has held an active salesperson license at any time during the current licensing cycle. Relicensure applicants must use a salesperson license application (BCS/LRE-006).
3. This form **MAY NOT** be used by Associate Brokers who wish to be licensed to a new broker. Associate Brokers must use BCS/LRE-020, Real Estate Associate Broker License Application.
4. **YOUR SALESPERSON LICENSE TRANSFER REQUEST CANNOT BE PROCESSED UNTIL RETURN OF YOUR PREVIOUS WALL LICENSE**
If wall license is not attached, please write a detailed explanation on side 2 of this transfer application why the license cannot be returned.
5. If making an immediate transfer, you **MUST** have the signature of the previous employing broker and the new employing broker on your pocket card. Retain your signed pocket card until your new employing broker receives the new license. If you do not have the signature of the previous employing broker, attach a copy of a certified letter that was sent notifying the broker of your termination of employment.
6. If it has been more than two weeks since you terminated employment with your previous broker, you cannot practice until the Department issues a new wall license and pocket card to your new employing broker.

SECTION 2A - APPLICANT INFORMATION

Applicant's Name (Last, First, Middle)		Social Security Number	Date of Birth
Address (Number and Street)		City	
State	Zip Code	Daytime Telephone Number ()	Salesperson I.D. Number 65-01-
Are you an officer, partner, or member of the new company/broker (if a company) listed below or do you own more than 24% of the stock? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please mark correct box: <input type="checkbox"/> Officer <input type="checkbox"/> Partner <input type="checkbox"/> Member <input type="checkbox"/> Stockholder			
Have you ever been convicted of a felony or misdemeanor for which you could have gone to jail? <input type="checkbox"/> Yes - Do not give details at this time. The Department may contact you at a later date. <input type="checkbox"/> No			
Ending date of employment with previous employing broker: _____			

FEE PAYMENT INFORMATION

FOR OFFICE USE ONLY - VALIDATION

Transfer of License OR Reissue of License in Same Licensing Year	Fee: \$10.00	(6501-33)
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Make your check or money order from a U.S. Financial Institution payable to:
STATE OF MICHIGAN - REAL ESTATE

FEES ARE NOT REFUNDED EXCEPT UNDER AUTHORITY P.A. 152 OF 1979, AS AMENDED AND R338.943 AND R338.944.

SECTION 2B - NEW EMPLOYING BROKER INFORMATION

Name of **New** Employing Broker (as shown on Broker's license-not Associate Broker, DBA or Branch Office)

Real Estate Referral Network, Inc.

Broker's License I.D. Number

65-01-313057

SECTION 3 - TRANSFER REQUEST (BOTH MUST SIGN)

We request that the Department issue applicant a real estate salesperson's license. If a license is issued, the broker agrees to exercise careful supervision over the salesperson's real estate activities.

DATE

ORIGINAL SIGNATURE OF SALESPERSON APPLICANT

ORIGINAL SIGNATURE OF NEW EMPLOYING BROKER

EFFECTIVE DATE OF SALESPERSON TRANSFER: _____