

## SALESPERSON AND/OR ASSOCIATE BROKER AFFILIATION FORM

Upon receipt of the license herein applied for, the following applicant: \_\_\_\_\_ will be employed by me or will otherwise be under contract with me to perform services as a real estate associate broker, and will work under my supervision. I will display his/her license prominently at my place of business, and when he/she leaves my employ I will notify the New Hampshire Real Estate Commission as required by RSA 331-A:17, IV, and Rea 404.02 within 5 days of termination and return his/her wall license and pocket id to the Commission.

To the best of my knowledge the applicant is of good moral character and is trustworthy.

Principal Broker's Name: \_\_\_\_\_

Business/Firm Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Principal Broker License #: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PRINCIPAL BROKER

State of \_\_\_\_\_

County of: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 20\_\_\_\_\_

(NOTARY SEAL)

\_\_\_\_\_  
NOTARY PUBLIC/JUSTICE OF THE PEACE

My commission expires: \_\_\_\_\_