

State of New Hampshire office of professional licensure and certification DIVISION OF LICENSING AND BOARD ADMINISTRATION

7 Eagle Square, Concord, NH 03301-2412 Phone: 603-271-2152

REAL ESTATE COMMISSION DEACTIVATION OF AN ACTIVE LICENSE FORM

	License type to be amende	ed: Salesperson B	roker
Licensee Name: As it appears on your license	Last	First	Middle
License Number:	Last	Date of Employment:	
Principal Broker Name: As it appears on your license	Last	First	Middle
Principal Broker Busines	ss Address :		
Principal Broker Phone	Number:	Principal Broker License Nu	mber:
Signature of Principal Broker			Date
Your request will not be	processed without the follo	owing:	
_	l License and Pocket Card available, please include an explanation		
I am giving my perm	ission for my personal addre	ess and email to be released as p	art of public records request.
referral fees or any other	er form of compensation. To nuing education requiremen	ngage in any real estate activities o maintain your inactive status lic it, send in a renewal application a	cense, you must complete the