

Michigan Department of Licensing and Regulatory Affairs
 Bureau of Commercial Services
 Licensing Division
 REAL ESTATE
 P.O. Box 30243, Lansing, MI 48909
 517-373-7353 Fax: 517-373-1044
 www.michigan.gov/realestate

FOR OFFICE USE ONLY

65-01

SALESPERSON LICENSE REQUEST FOR RECORD CHANGE

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

TOTAL FEE: \$10.00

Use LRE-021 to request a duplicate license.

TYPE OR PRINT CLEARLY IN BLACK INK TO DESIGNATE CHANGE(S) REQUESTED.

NAME AND ADDRESS ON CURRENT LICENSE

Name on Current License		ID Number 65-01	
Home Address (Number and Street)		P.O. Box, if applicable	
City		State	ZIP
Social Security Number	Date of Birth	Current E-mail Address	

NAME AND/OR ADDRESS CHANGES REQUESTED

New Name	
New Address (Number and Street)	
P.O. Box, if applicable	
City	
State	
ZIP	
Current Daytime Phone Number	

VERIFICATION AND SIGNATURE

Effective Date of Changes: _____

Wall License: Attached/Enclosed Returned by Broker Unable to locate or unavailable

Signature of Salesperson

Signature Date

FEE PAYMENT INFORMATION

FOR OFFICE USE ONLY - VALIDATION

Name/Address Change(s) Total Fee: \$10.00 (6501-32)
 (either, or both)

NOTE: Return wall license with this form and fee.

Make your check or money order in U.S. Currency payable to:

STATE OF MICHIGAN

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