

# INSTRUCTIONS FOR COMPLETING THE BUSINESS CHANGE OF ADDRESS FORM

- Only ONE form is required per office address change.
- The form, licenses, and fees may be sent 10 days prior to the address change, during the address change, or up to 10 days after the address change. The licenses will be mailed to the new location address. The responsible broker should bear this in mind and is responsible for being able to accept mail at the office location. **POST OFFICE BOXES ARE NOT ACCEPTABLE.**
- **IF** the broker is requesting to change the business address to their **PERSONAL HOME**, a copy of a **privilege license** from the city or county (if the home is not in the city limits). If the home is in a covenanted subdivision, we will need a copy of the covenants showing home businesses are allowed, or a letter from the HOA granting approval to operate a business from the home. **This information must be sent with the application.**
- A broker may log in to their MREC account to see all licenses associated with the broker and also with respective company licenses. Brokers are **STRONGLY** encouraged to check all licensees for current CE and E & O insurance before sending the licenses for processing. If a licensee is deficient in either category, the license will not be returned when the others are.

## **BEFORE MAILING, BE SURE THE FOLLOWING HAVE BEEN ADDRESSED:**

- Application **MUST** be typed or printed. If it is printed, be sure handwriting is **VERY CLEAR**. MREC is not responsible for any misprints due to illegible handwriting.
- **ALL** questions have been answered in their entirety.
- The **CORRECT** total fee is included.
- The original wall license(s) is/are included.



## Mississippi Real Estate Commission

LeFleur's Bluff Tower, Suite 300  
4780 I-55 North, Jackson, MS 39211

OR

Post Office Box 12685

Jackson, MS 39236-2685

(601) 321-6970 – Telephone \* (601) 321-6955 – Fax

[www.mrec.ms.gov](http://www.mrec.ms.gov)

**\$50.00 FEE**

### BUSINESS CHANGE OF ADDRESS FORM

*(Application will NOT be accepted unless typed or printed CLEARLY.)*

THE RESPONSIBLE (PRINCIPAL) BROKER IS TO COMPLETE THE FOLLOWING FORM AND RETURN IT TO THE MREC WITHIN **TEN (10) DAYS** OF RELOCATING THE OFFICE.

The **ORIGINAL** of **ALL** wall licenses (company, broker, and salesperson) **MUST** be returned to the MREC along with this form and **MUST** be accompanied with a fee of **\$50 PER LICENSE**.

RESPONSIBLE BROKER: \_\_\_\_\_  
(PRINT) (Name) (License #)

COMPANY NAME: \_\_\_\_\_  
(PRINT) (Name) (License #)

NEW ADDRESS: \_\_\_\_\_  
(PRINT) (Street Address)

\_\_\_\_\_  
(P. O. Box)

\_\_\_\_\_  
(City) (State) (Zip Code)

\_\_\_\_\_  
(County)

OFFICE PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_  
(PRINT)

RESPONSIBLE BROKER SIGNATURE: \_\_\_\_\_  
(Signature) (Date)