



AGENT NO LONGER AT OFFICE

Date: _____

The following agent no longer works for the company/firm:

Agent's Name: _____

Agent's MLS ID: _____

Office ID Number: _____

Broker's Name: _____

Broker's MLS ID: _____

Broker's Signature*: _____ **Date:** _____

** Broker signature is REQUIRED for this form to be valid.*

**Please Note: Brokers must remove the licensee/agent
from the Department of Real Estate (DRE) when
agent is no longer with the company.**