NEBRASKA REAL ESTATE COMMISSION 301 Centennial Mall South PO Box 94667 Lincoln, NE 68509-4667



## TERMINATION OF AFFILIATION OF A SALESPERSON OR ASSOCIATE BROKER

This form must be completed by the designated broker to acknowledge the termination of an affiliated salesperson or associate broker. This form shall be used whether an affiliated licensees is transferring to another broker, or being placed on inactive status.

Please return the form to the Nebraska Real Estate Commission upon completion. Upon receipt, the Commission will send you verification of such termination via email correspondence.

1.	Name of Affiliated Licensee:	
----	------------------------------	--

2. License Number of Affiliated Licensee (if known): \_\_\_\_\_

3. Request for Termination is being requested by the: (please check one)

□ Licensee

Designated Broker

4. Designated Broker's Name: \_\_\_\_\_

Signature (Designated Broker/Authorized Signee)

Date