

Kentucky Real Estate Commission
10200 Linn Station Road Suite 201
Louisville, KY 40223
(502) 429-7250
Fax: (502) 429-7246

CANCELLATION REQUEST

I, _____ request the cancellation of my license.
(printed name)
License number: _____.

I am aware that once my license is cancelled I am prohibited from engaging in real estate brokerage.

I am aware that during the first year of license cancellation, reinstatement of a cancelled license is subject to fines for late renewal. After one year, in order to reinstate a license, I will be subject to retesting and to obtaining any prevailing pre-license requirements at the time.

Signature

Date

Please Print:

Name: _____

Address: _____

Please mail or fax to the Commission's office immediately.