## **CHANGE FORM - REAL ESTATE**

Access this form via website at: www.hawaii.gov/hirec

Form is <u>2</u> pages. Signature(s) REQUIRED on page 2!

Submit **ORIGINALS** only - FAX and PHOTOCOPIES will not be accepted.

Use fillable feature or print in BLUE or BLACK INK ONLY). READ instructions carefully. Honolulu, HI 96801

DCCA, PVL Licensing Branch P.O. Box 3469

**REAL ESTATE COMMISSION** 

Mail to:

| SECTION A.  |  |  |  | or   |
|---|--|--|--|--|
| Legal Name of Individual or Business Entity:  |  | Deliver to:  |  | <b>or</b><br>chant St., Room 301<br>u, HI 96813  |
| License Name (Individual's First, Middle, LAST, or Entity)  |  | License Number   |  | Other Registrations  |
|   |  | RB-  | (  | CMA-   |
| Residence Location Address, if individual or sole proprietor: (NO P.O. BOX)   |  | RS-  |  | CHO-   |
| Business Address only if entity: (NO P.O. BOX)  |  | Phone Number (day  | s)   |  |
| Mailing Address:  |  | Email Address  |  |  |
| INDICATE CHANGE BEING REPORTED BELOW: NO changes will be recorded to appropriate box(es) is/are checked required signatures are on page 2 checks are made payable to "Commerce and Consumer Affairs" (Note: a \$25 service charge will be assessed for payments that are change will not be processed. If no fee is indicated, there is no fee for the effective date of a change will be as indicated on the form. You must submomply may result in disciplinary action. | dishonored for any for that change.)   |  |  | oy Rule 16-99-5. Failure to  |
| Change RESIDENCE LOCATION ADDRESS to address above. Sign and date page 2 in Section B.  Change MAILING ADDRESS. Complete "Mailing Address" above. Sign and date page 2 in Section B.  | "Application stamped l   | y, includes sole propo<br>on for Registration of<br>by the Business Regis    | rietor). Subm<br>Trade Name'<br>stration Divisi      | " that has been <b>filed-</b><br>on, Commerce and                                      |
| — Change BUSINESS ADDRESS of mainsinal place of husiness or   | Consumer<br>From:  | Affairs. Sign and dat  | te page 2 in S                                       | ection B. <b>Fee: \$10</b>   |
| Change BUSINESS ADDRESS of principal place of business or branch office. Sign and date page 2 in Section B to certify that the new business address is in compliance with Chapter 467, HRS, and   |  |  |  |  |
| Chapter 99, HAR.  New business address:   | Delete:  |  |  |  |
| Phone Number:   | Change legal NAME OF ENTITY or INDIVIDUAL. Attach a copy of legal document showing name change (Entity: File-stamped copy of "Certificate of Amendment" filed with the Business Registration Division, Commerce & Consumer Affairs and an entity resolution. Individual: Marriage certificate, divorce decree, etc.). Sign and date page 2 in Section B. Fee: \$10 |  |  |  |
|   | Change t   | o:   |  |  |
| DUPLICATE LICENSE - Pocket Licenses and Wall Certificates can be obtained on-line at no cost using the MyPVL site at <a href="https://pvl.ehawaii.gov/mypvl">https://pvl.ehawaii.gov/mypvl</a> .  NOTE: Wall Certificates are available for printing by "ACTIVE" licensees  | Change, Add or Delete (check one) LICENSE NAME of individual. Sign and date page 2 in Section B. The license name of individual broker, RBS, or salesperson shall include the individual's full legal surname. Fee: \$10   |  |  |  |
| only.   | Change t   | o:   |  |  |
| SURRENDER of License (individual, entity, or branch office): Complete Sepetitions filed against the licensee or disciplinary hearings may surrender the activity in the future must meet all requirements as a new applicant. Sign and do   | license. Once licer  | ise is surrendered, the  |  |  |
| Place license INACTIVE. Complete Section A above. Releasing principal broker or is going inactive is required in Section B. If unable to obtain signature of licensee licensee written notification. NOTE: If the licensee is unable to obtain releasing to Releasing Broker on the Change Form or Experience Statement by Broker" on the Section C. (BIC NOT AUTHORIZED TO SIGN THEMSELVES OR OTHER BIC'S ON OR  | e who is going inactiv<br>broker's signature, pl<br>e Real Estate Branch v<br>OFF.)  | ve, Rule 16-99-5.1(c) re<br>ease review the memo<br>website. If BIC is being | equires the rele<br>orandum "Proo<br>g placed on ina | easing broker to provide the cedures for Difficulties with active status, PB must sign |
| <b>Licensee Deceased</b> . Provide a copy of death certificate or obituary. Signat  | cure of individual su  | bmitting the informa   | ition is not re                                      | quired.  |

| REACTIVATE L  | icense:  |   |  |
|---|--|---|--|
| <u>Salesperson/Br</u><br>brok<br>preso<br>certii<br>origi | oker-Salesperson: Licensee reactivating is to complete Section A on pager in charge must complete Section D below. A licensee who has been in cribed continuing education (CE) hours of the immediate prior renewal pried CE core or elective courses completed during the immediate prior renal certificates at <a href="https://pvl.ehawaii.gov/mypvl">https://pvl.ehawaii.gov/mypvl</a> . If you are a new salesperired. Fee: \$25. | active for one or more renewal periods, sha<br>period. The commission shall credit the licer<br>enewal period. Attach original CE certificate | ll first satisfy the<br>nsee with CE hours for any<br>s. You may obtain                  |
| <u>Entity</u> : Input n<br>Good<br>avail<br>assoc         | name of entity on page 1 in Section A. Principal broker's signature is requed Standing" obtained from the Business Registration Division of the Deparable at www.hawaii.gov/hirec), and separate change form for the new prociating salespersons and broker-salespersons. If using a trade name, attaine Business Registration Division. Fee: \$75.  | artment of Commerce and Consumer Affairs<br>rincipal broker and broker in charge(s) (if ap  | s, entity resolution (sample<br>plicable), and all                                       |
| have<br>to re   | Input name of entity on page 1 in Section A. Principal broker's signature at least one (1) broker in charge. If the principal broker has not already ogister a broker in charge for the brokerage firm. <b>Fee: \$75</b> .   | lesignated a broker in charge, submit anoth   |  |
| Sole Proprieto  | <u>or:</u> Complete "Application for License: Real Estate Sole Proprietor" and fol   | low the instructions on that form.  |  |
| currently affiliate                                       | <b>ER:</b> Mark this box if you are immediately changing to a different broker. ed with a broker, your former broker must complete Section C below. Yor, PB must sign Section C. (BIC NOT AUTHORIZED TO SIGN THEMSELVES C  | our new principal broker or broker in charge  | ,  |
| complete Sectio<br>registration app                       | <b>LE PROPRIETOR:</b> You must complete Section A on page 1 and Sect n C below. (If you are on inactive status, see REACTIVATE License above proved by the Business Registration Division of the Department of Co follow the instructions on that form. <b>Fee: \$65</b> .   | e.) If you will be using a trade name, attach   | a file-stamped copy of current trade name  |
|   | <b>IPAL BROKER ("PB"):</b> Check this box if the entity is changing its princi from new principal broker, and 1 from former principal broker. Only of ER.  |   |  |
| com   | <u>:nership/LLC/LLP</u> : Input name of the entity in Section A on page 1. The for<br>plete Section D below. Attach an entity resolution. Sample of an entity re<br>RATE CHANGE FORM   |   |  |
| <u>New Principal E</u><br>brok                            | <u>Broker:</u> Input name of the new PB in Section A on page 1 and have him/h<br>erage firm, have your former PB complete Section C below. (NOTE: If nev<br>does not have to be signed by the former PB.) AND ON A SEPARATE CH   | v PB is a Real Estate Broker-salesperson with   |  |
|   | al Broker: Input name of the former PB in Section A on page 1. If the for  |   | hange Broker" box  |
|   | complete Section C below. Have the new PB or broker in charge comple<br>se inactive. If this change form is not received, licensee will automatically  |   |  |
| Change to Add   | or Release BROKER-IN-CHARGE ("BIC"):   | -   |  |
|   | <u>er in charge</u> : Input BIC's name in Section A on page 1 and sign and date S<br>have your former PB complete Section C below and your new PB compl  |   |  |
|   | ated within the brokerage firm, also mark the "Change from broker-sales  |   |  |
|   | on D below. If inactive, also mark the "Reactivate" box and follow the ing   |   | to another firm  |
|   | <u>r broker in charge</u> : Input former BIC's name in Section A on page 1 and si<br>s the "Change Broker" box and have the former PB complete Section C be  |   |  |
|   | ging to a broker-salesperson within the brokerage firm, also mark the "C   |   | sperson" box below and   |
| nave  | your PB complete Section D below. If going inactive, follow instructions  Change from broker-salesperson to broker in charge.  | s to place license inactive.  Change from broker in charge  | e to broker-salesperson  |
| _   | ,  |   | •  |
| period covered. registered with t                         | <b>TEMPORARY Principal Broker or Broker In Charge:</b> Input the na<br>A principal broker or broker in charge who will be absent from the princ<br>the principal place of business) must designate a temporary principal bronce extension of 6 months subject to Commission approval. In case of a   | ipal place of business for more than 30 cale<br>ker or temporary broker in charge. A tempo  | ndar days (and no other broker in charge is<br>orary appointment may be made for up to 6 |
| certificate, which  | never is appropriate.  | pg,   | g  |
|   | ignment. Complete period covered (MM/DD/YYYY):   | FROM  | TO   |
|   | er to complete Section C below; Temporary broker accepting assignmer   | nt to complete Section D below.   |  |
| SECTION B. SIGNATURE OF L                                 | ICENSEE  | DATE  |  |
| SECTION C.  |  |   | License No. of Broker  |
| DATE RELEASED<br>(if applicable)                          | CICNATURE  |   | RB -   |
|   | <b>SIGNATURE of Broker</b> (Principal Broker, Sole Proprietor Broker or Broker office). <b>Please <u>print</u> your name after your signature</b> .  | n Charge of branch  | License No. of Entity  |
|   |  |   | RB -   |
|   | NAME & FULL BUSINESS ADDRESS of Releasing Entity or Branch Office<br>Suite No., City, State and Zip Code)  | te (Number, Street,   |  |
| DATE HIRED (if applicable)                                |  |   | License No. of Broker  |
|   | SIGNATURE of Broker (Principal Broker, Sole Proprietor Broker or Broker in Broker)   | in Charge of branch   | RB -   |
|   | office). Please print your name after your signature.  | License No. of Entity   |  |
|   |  |   | RB -   |
|   | NAME & FULL BUSINESS ADDRESS of Hiring Entity or Branch Office (I Suite No., City, State and Zip Code)   | lumber, Street,   |  |

Signatories in Section B, C, and/or D certify that the information provided is true and correct.