



## ARKANSAS REAL ESTATE COMMISSION

Phone: (501) 683-8010 Fax: (501) 683-8020

### REQUEST FOR DUPLICATE LICENSE FOR BRANCH OFFICE (PB Only)

#### INSTRUCTIONS:

- Complete and return this form with \$30.00 fee.
- Required information for the licensee to be the Designated Executive Broker for the Branch Office.
- Trust Account Form
- A photograph of the firm office signage

#### BRANCH OFFICE INFORMATION

Branch Office Name: \_\_\_\_\_

Branch Office Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Branch Phone: \_\_\_\_\_

Name of Branch Office Designated Executive Broker: \_\_\_\_\_

License Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

#### PRINCIPAL BROKER

Principal Broker Name (please print): \_\_\_\_\_

License Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

***I, the undersigned Principal Broker for the main office of the above-named Branch Office, do hereby apply for a duplicate license for that branch office.***

Principal Broker Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTICE:** ACA 17-42-309 requires that the Principal Broker of a main office also hold a Duplicate License at all Branch offices of his/her firm.

<b>COMMISSION USE ONLY</b>
Receipt # _____
Date Paid _____

Return to the Arkansas Real Estate Commission | 612 South Summit St | Little Rock, AR 72201