



KANSAS REAL ESTATE COMMISSION

Three Townsite Plaza
120 SE 6th Avenue, Suite 200
Topeka, Kansas 66603-3511
www.krec.ks.gov (785)296-3411
Fax: (785)296-1771 krec@ks.gov

**ADD OR REMOVE
AFFILIATION
REL-330**

THIS FORM IS FILLABLE ONLINE

Licensee Name

License Number

REMOVE AFFILIATION

I wish to terminate my affiliation with the following company/branch, while continuing my existing affiliation with another company/branch. Complete company information and secure signatures below.

Action Required

No fee

Return your original wall license. For faster processing, the terminating broker may write "cancelled" across the face of the original license and add his/her name, signature and date. The cancelled license may be scanned and emailed to krec@ks.gov or faxed to 785-296-1771 with this form.

If you are the supervising/branch broker, attach the Close Company form or Change of Supervising Broker form.

ADD AFFILIATION

In addition to my current affiliations, I wish to affiliate with the following company or branch.

Action Required

Fee \$10.00. Enclose a check or money order payable to KREC. Alternatively, use the attached form to pay by credit card. Secure signatures below.

COMPANY INFORMATION

Company Name	Company Number	Franchise Name
Address		

LICENSEE SIGNATURE

SIGNATURE

DATE SIGNED

NOTE: In lieu of the licensee signature above, a copy of correspondence sent to the licensee informing them of removal of this affiliation may be attached.

TERMINATING BROKER CERTIFICATION (Remove Affiliation)

I certify that I will no longer act as supervising/branch broker for the above named licensee (or office, if you are the broker).

SIGNATURE

DATE SIGNED

NEW SUPERVISING/BRANCH BROKER CERTIFICATION (Add Affiliation)

I hereby accept the responsibility of supervising the above named licensee (or office, if you are the broker).

SIGNATURE

DATE SIGNED

CONTINUED SUPERVISING/BRANCH BROKER CERTIFICATION (Maintaining Existing Affiliation)

I hereby acknowledge and agree to the additional company affiliation for the above named licensee.

SIGNATURE

DATE SIGNED

KREC USE ONLY Initials: _____ Date Entered: _____ Fee: \$ _____ Deposit Date: _____

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CREDIT CARD PAYMENT INFORMATION**For Adding a Company Affiliation**

\$10.00 plus a **\$0.25** credit card processing fee

Licensee Name:	Card Holder: (if different than licensee)	Email Address: (optional/for electronic receipt)
Card Number:	Expiration Date:	Zip Code:
Card Type:		
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express
		<input type="checkbox"/> Discover

Submit to the Kansas Real Estate Commission by:

Email: krec@ks.gov or Fax: 785-296-1771

After processing your payment, this document will be shredded.

If you prefer to provide your credit card information by phone, call 785-296-3411.