



STATE OF TENNESSEE
 DEPARTMENT OF COMMERCE AND INSURANCE
 TENNESSEE REAL ESTATE COMMISSION
 500 JAMES ROBERTSON PARKWAY
 NASHVILLE, TENNESSEE 37243-1151
 (615) 741-2273 or (800) 342-4031
 www.tn.gov/commerce

T.R.E.C. Form 1.

REVISED 4/12/18

Do not write or mark in the space below.

TRANSFER, RELEASE AND CHANGE OF STATUS FORM

Check appropriate box (es) and complete all required lines of information. Remit appropriate fee for each box checked.

Amount remitted \$ _____

- A. Transfer to new firm (1 thru 8) (8080) \$25.00
- B. Change of licensee name with **PROOF** (1,2,3, & 7) (8030) \$10.00
- C. Change of status to **ACTIVE** (1, 3, 4, 6, 7&8) (7000) \$25.00
- D. Change of status to **RETIRED** (1,5,7,& 8) (6070) \$25.00
(Licensee must continue to pay renewal fee when due, TCA 62-13-318)
- E. Request duplicate of lost license (1,2,5,& 7) (8010) \$10.00
- F. **Designate** firm's principal broker (1, 2, 5, 6) (9999) \$25.00
- G. **Remove** Principal Broker designation (1, 2, 5, 7) **NO CHARGE** (9997)
- H. **Add** Principal Broker to Additional Firm (1 thru 7) (9999) \$25.00
- I. Principal Broker **RELEASE** of affiliated licensee (1, 2, & 5) **NO CHARGE**, Licensee will be placed in problem status, SEE additional information on page 2 of this form. (8070)

I request T.R.E.C. process as indicated above

1. Licensee's Name	Home Phone Number	E-Mail Address	License/File ID Number
2. Current Firm Name	Firm Phone Number	E-Mail Address	Current Firm File ID Number
3. New Firm/Licensee Name	New Firm Phone Number	E-Mail Address	New Firm File ID Number
Hilltop Home Realty 888-407-2410 TN@TheVirtualRealtyGroup.com 265287			
New Firm Street Address			
4.(a) 1126A Louisville Hwy			
City	State	Zip Code	
Goodlettsville	TN	37072	
Firm Mailing Address (P.O. Box only)			
4.(b) 11285 Lebanon RD PMP 47 Mount Juliet, TN 37122			
ORIGINAL SIGNATURES ONLY. PROVIDE ALL INFORMATION AND DATES			
5. Current or Releasing Principal Broker's Signature	PB License (File I.D.) Number	Date of Change or Release	
6. New Principal Broker's Signature	PB License (File I.D.) Number	Date	
7. Licensee's Signature	Date		
8. Licensee's Home Mailing Address			
City	State	Zip Code	

PLEASE READ REVERSE OF THIS FORM FOR IMPORTANT INFORMATION AND INSTRUCTIONS

If this form does not have the information printed on the reverse, you can obtain a copy of both sides by contacting the TREC office or web site at: www.tn.gov/commerce. IN0857 (Rev. 4/12/18)