

Termination Form

A former member has one year to reinstate. After one year, application as a new member (including application fee is required).

Reinstatement Fees (when reinstating with the same firm):	1 - 6 Days - \$25	7 - 90 Days - \$200	91 - 365 Days - \$220
Reinstatement Fees (when reinstating with a different firm):	1 - 30 Days - \$25	31 - 90 Days - \$200	91 - 365 Days - \$220

*Reinstatement fees do not apply to affiliates

Current Membership Type:

- | | | | |
|----------------------------------|---------------------------------|--|---------------------------------|
| <input type="radio"/> Broker | <input type="radio"/> REALTOR® | <input type="radio"/> Non-Member Salesperson | <input type="radio"/> MLS Only |
| <input type="radio"/> Board Only | <input type="radio"/> Secondary | <input type="radio"/> Senior | <input type="radio"/> Affiliate |
| | | <input type="radio"/> Lifetime | |

Name: _____ Effective Date: _____

Home Address: _____ City: _____ Zip: _____

Cell Phone #: _____ Real Estate License #: _____

New E-Mail: _____

Terminating Office Name: _____ Broker Code: _____

Address: _____ City: _____ Zip: _____

Signature is Required For All Terminations

AAABoR Policy 8.22: Terminated Discovery
 "In the event a licensee has been terminated with AAABoR by the Broker/DR and is later discovered to still be licensed to that Broker, a \$500 fine will be assessed in addition to all other fees, dues, etc. that may be owed."

Brokers/DR: Please check one of the boxes below:

- I have sent the terminated agent's license back to the Michigan Department of Licensing and Regulatory Affairs.
- I intend to send the terminated agent's license back to the Michigan Department of Licensing and Regulatory Affairs within five (5) days in accordance with Section 339.2507 of the State's Occupational Code.
- The terminated agent will remain with this office as a Non-Member Salesperson. A Non-Member Salesperson Application must be completed if this option is marked. Visit www.AAABoR.com for membership forms.

Broker/DR Signature: _____

Printed Broker/DR Name: _____ Date: _____

OR

Affiliate Signature: _____

Printed Affiliate Name: _____ Date: _____

FOR AAABOR OFFICE USE ONLY			Revised May 2008
Date Received: _____	Date Effective: _____	Processed by: _____	Card Term: _____