

# Brokerage Name Change Application



601-1595 Bedford Highway, Bedford, Nova Scotia, B4A 3Y4

Phone: 902-468-3511 800-390-1015

Fax: 902-468-1016 800-390-1016

Email: [licensing@nsrec.ns.ca](mailto:licensing@nsrec.ns.ca)

Website: [nsrec.ns.ca](http://nsrec.ns.ca)

Providing false information on any Commission licensing application may result in the refusal of the application and the suspension or cancellation of any license issued thereupon.

**NOTE:** Incomplete or illegible applications will be returned unprocessed.

If more space is needed to respond to questions, attach an additional sheet of paper.

## PART A | BROKERAGE NAME CHANGE

EXISTING BROKERAGE NAME		
NEW BROKERAGE NAME		
BROKERAGE MAIN BUSINESS ADDRESS		CITY/TOWN
PROVINCE	POSTAL CODE	OFFICE PHONE NUMBER

## PART B | UPDATED TRUST ACCOUNT

**NAMING CONVENTION:** The trust account must be in the brokerage's new name, followed by the words "Real Estate Trust Account".

FINANCIAL INSTITUTION ADDRESS	CITY/TOWN
ACCOUNT NAME AND NUMBER	

## PART C | ATTACH SUPPORTING DOCUMENTATION

- Letter or statement from the financial institution confirming that the trust account has been renamed in accordance with the naming convention for trust accounts.
- Copy of the Name Change Certificate with the new brokerage name from the Registry of Joint Stocks.

## PART D | PAYMENT—The Commission cannot process VISA DEBIT cards with this form.

<input type="checkbox"/> AMEX	<input type="checkbox"/> MasterCard	<input type="checkbox"/> VISA*
CREDIT CARD NUMBER		
EXPIRY DATE	V-CODE	AMOUNT \$100.00
NAME OF CARD HOLDER		SIGNATURE OF CARD HOLDER