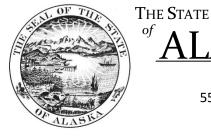
ACTZA Department of Com



SKA Department of Commerce, Community, and Economic Development Division of Corporations, Business and Professional Licensing

Real Estate Commission 550 West 7th Avenue, Suite 1500, Anchorage, AK 99501 Phone: (907) 269-8160 Email: RealEstateCommission@Alaska.Gov Website: ProfessionalLicense.Alaska.Gov/RealEstateCommission

Notice of Temporary Absence of Broker/Associate Broker of Record

The commission must be notified in writing, within 3 calendar days, when the broker/associate broker returns, and the substitute broker/associate broker is no longer in charge.

PART I Broker/Associate Broker Information

Broker/Associate Broker Name:			AK License Nu	ımber:	
Email Address:			Phone Numbe	er:	
Out of Office Start Date:					
Out of Office Return Date:			will notify the c	commissio	n in writing at a later date.
Will you be available by phone or email during the absence?			′es 🗌	No	

PART II Substitute Broker/Associate Broker Information

Substitute Broker/Assoc Broker Name:	iate	AK License Number:	
Email Address:		Phone Number:	

Signatures					
I certify the above information is true and correct.					
Broker/Associate Broker Signature:	Date Signed:				
Substitute Broker/Associate Broker Signature:	Date Signed:				