



NOTIFICATION OF CLOSING OF REAL ESTATE BROKER COMPANY

State Form 54973 (R4 / 4-23)

**INDIANA REAL ESTATE COMMISSION
PROFESSIONAL LICENSING AGENCY**
 402 West Washington Street, Room W072
 Indianapolis, IN 46204-2724
 Telephone: (317) 232-2960
 Fax: (317) 555-9876
 E-mail: pla5@pla.in.gov
www.IN.gov/pla

- INSTRUCTIONS:**
1. Transfer all brokers associated with the company to another broker or company, or to "Unassigned" status, by completing a Reassignment Form (SF 47478) for each licensee. **This step must be completed prior to submission of this form.**
 2. Complete this form and mail to: **Indiana Professional Licensing Agency
402 W. Washington St., Rm. W072
Indianapolis, IN 46204
E-mail: pla9@pla.in.gov**

| COMPANY INFORMATION | | |
|--|-----------------|----------------------------------|
| License number | Name of company | Name of contact person |
| Address (number and street, city, state, and ZIP code) | | E-mail address of contact person |

| LICENSE NUMBER | NAME OF MANAGING BROKER | RESIDENTIAL ADDRESS |
|----------------|-------------------------|---------------------|
| | | |

| LICENSE NUMBER | NAME OF BROKER | REASSIGNMENT STATUS (completed using Reassignment Form) |
|----------------|----------------|--|
| | | <input type="checkbox"/> Reassigned to another broker or company <input type="checkbox"/> Reassigned to "Unassigned" status |
| | | <input type="checkbox"/> Reassigned to another broker or company <input type="checkbox"/> Reassigned to "Unassigned" status |
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| | | <input type="checkbox"/> Reassigned to another broker or company <input type="checkbox"/> Reassigned to "Unassigned" status |

For additional associates, please attach copy.

I certify by my signature below that, as the broker in charge of this company, I have completed all requirements relating to any escrow accounts associated with the company.

| | | | |
|------------------------------|---------------------------------|-------------------------|-----------------------------|
| Signature of managing broker | Printed name of managing broker | Date (month, day, year) | Telephone number () |
|------------------------------|---------------------------------|-------------------------|-----------------------------|