

Name:

State of Rhode Island
Department of Business Regulation
Division of Commercial Licensing
Real Estate Section
1511 Pontiac Ave, Bldg. 69-1
Cranston, RI 02920

## **CHANGE OF HOME ADDRESS FORM**

RE License #:

011 4 11	
Old Address:	
New Address:	
Cell Number:	Home Phone:
E-Mail Address:	
NAME CHA	NGE
A copy of marriage certificate, divorce dec this request.	cree or court order must accompany
Name:	RE License #:
New Name:	
Date of Change:	E-Mail Address:
Cell Number:	Home Phone:

## **CHANGE OF BUSINESS ADDRESS**

Broker / Owners moving the physical address of their business location should contact the Real Estate section and provide us with a letter detailing their old and new addresses along with updated contact information. Please include a list of all agents affiliated with your office and include their Real Estate License Number and fax or mail together.