



“Dedicated To Providing Quality
Customer Service”

OKLAHOMA REAL ESTATE COMMISSION

CHANGE OR CLOSE TRUST ACCOUNT FORM

Type or Print Clearly – Please use blue or black ink only

Name of Brokerage _____
(Name as Appears on License) (License Number)

Business Address _____
(City) (State) (Zip + 4)

Mailing Address _____
(City) (State) (Zip + 4)

Business Phone Number (____) _____

All trust accounts are required to be registered with the Commission. If you need to register additional accounts, please complete another Trust Account Registration Form.

Name of Depository Institution _____

Physical Address _____
(City) (State) (Zip + 4)

Mailing Address _____
(City) (State) (Zip + 4)

Account Number _____ Styled As _____
(Exact Name in Which Account is Held)

Account is used for: Property Management Real Estate Sales Other _____

Account has Changed **or Closed**

Account is: *Interest Bearing Non-Interest Bearing

Name of Depository Institution _____

Physical Address _____
(City) (State) (Zip + 4)

Mailing Address _____
(City) (State) (Zip + 4)

Account Number _____ Styled As _____
(Exact Name in Which Account is Held)

Account is used for: Property Management Real Estate Sales Other _____

Account has Changed **or Closed**

Account is: *Interest Bearing Non-Interest Bearing

I hereby authorize designated staff employees of the Oklahoma Real Estate Commission access to records pertaining to all established trust account(s) for investigation or audit purposes.

(Signature)

(Date)

*Commission Rule 605:10-13-1(c) & (e); however, refer to the Rules for additional requirements.