**The broker will leave an agency**

**to act for another agency or on his own account**

**[Date]**

**Mr. (Mrs.) [Name]**

Address

City (Québec)

Postal code

**Subject: Brokerage contract No. [brokerage contract number]**

Dear Client:

Please note that as of **[date], [name of broker]** will cease his activities on behalf of our agency and will henceforth act **[on his own account** or **for the agency name agency].**

In accordance with the section entitled: "CHANGE AFFECTING THE AGENCY OR THE BROKER BOUND BY A BROKERAGE CONTRACT" of the OACIQ brokerage contract which you have signed with our agency, you have the following options:

* Continue doing business with our agency; in this case, a new broker will be assigned to you, under the same terms and conditions as those outlined in your current brokerage contract;
* Continue doing business with the broker who will henceforth be acting on his own account or for a new agency, under the same terms and conditions as those outlined in your current brokerage contract;
* Terminate your brokerage contract.

Please let us know which option you choose using the attached form and return it to us no later than **[same date as first paragraph].** If we do not receive your choice before that date, your contract will be automatically cancelled.

**[salutation]**

**[signature]**

**The broker will soon leave an agency**

**to act for another agency or on his own account**

**Form**

Indicate your choice by checking the box next to the option you wish to exercise regarding brokerage contract No. **[brokerage contract number].**

I wish to:

☐ Continue doing business with your agency. I understand and accept that a new real estate broker will be assigned to me to replace **[name of broker leaving the agency]**.

Or

☐ Continue doing business with **[name of broker leaving the agency]**, who will henceforth be acting on his own account or for a new agency, under the same terms and conditions as those outlined in our current brokerage contract.

Or

☐ Terminate the brokerage contract. I understand that my brokerage contract will be terminated upon receipt of this form.

 Signature of client

 Date

If necessary based on what is indicated in brokerage contract No. **[brokerage contract number],** my spouse, **[name of spouse]**, concurs in this notice.

 Signature of spouse

 Date

Thank you for returning this form to: **[address of agency]**