

**ARIZONA DEPARTMENT OF REAL ESTATE (ADRE)**

Licensing Division

[www.azre.gov](http://www.azre.gov)

100 North 15th Avenue, Suite 201, Phoenix Arizona 85007

KATIE HOBBS  
GOVERNORSUSAN NICOLSON  
COMMISSIONER**CANCEL LICENSE - VOLUNTARILY (FORM LI-218)**

Form is completed by **licensees** to request a **voluntary cancellation** of licensure. **Submit the completed form to the Department through the Department Message Center** [Click Here](#)

**Licensee Information**

Licensee Full Name (Please Print):		Phone Number:	Email:
<input type="checkbox"/> Active License*	License Number:	Expiration Date:	
<input type="checkbox"/> Inactive License			

**Please check the boxes to affirm the information stated.**

<input type="checkbox"/> I fully understand that I have the right to <b><u>voluntarily cancel</u></b> my license per A.R.S. §32-2137.	
<input type="checkbox"/> I fully understand that, should I want to reinstate my license, I must <b>comply</b> with the <b><u>requirements</u></b> stated in A.R.S. §32-2131.	
<input type="checkbox"/> I understand that I am not presently <b><u>under investigation</u></b> by the Department.	
<input type="checkbox"/> The Department has <b>not commenced</b> any <b><u>disciplinary proceedings</u></b> against my license.	
Licensee Signature: <b>X</b>	Date:

**\*Broker information and signature only required for active real estate licensees**

Print Employing Broker Name:	
Designated Broker Signature: <b>X</b>	Date:

☐ **ADRE has reviewed that the licensee is not presently under investigation and has not commenced any disciplinary proceedings against the licensee.**

**X** \_\_\_\_\_ **Date** \_\_\_\_\_  
**ADRE Approving Manager**