

## Notification of inactive or closed trust account

Regulation 24, Real Estate Agents (Audit) Regulations 2009

1. Use this form to notify us if your, or your agencies, trust account has been made inactive or closed.
2. When completed, send via one of the methods listed:  
By email: [licensing@rea.govt.nz](mailto:licensing@rea.govt.nz)  
By post: The Registrar, Real Estate Authority, PO Box 25371, Wellington 6140  
By courier: The Registrar, Real Estate Authority, Level 4, 95 Customhouse Quay, Wellington
3. For help completing this form, call 0800 FOR REA (0800 367 732) or 04 471 8930 or visit [rea.govt.nz](http://rea.govt.nz)
4. Please retain a copy of this form for your records.

### 1. Type of licence held (tick box)

Individual agent (sole trader)    Partnership    Company agent

### 2. Licence details

Licence number: \_\_\_\_\_

Company name (if applicable): \_\_\_\_\_

Trading name of business: \_\_\_\_\_

Name of franchise group or marketing group (if any): \_\_\_\_\_

### 3. Postal address

Street: \_\_\_\_\_

Suburb: \_\_\_\_\_

City: \_\_\_\_\_ Postcode: \_\_\_\_\_

### 4. Contact person

Name: \_\_\_\_\_

Telephone number(s): \_\_\_\_\_

Email address: \_\_\_\_\_

**5. Inactive or closed trust accounts**

The trust account(s) listed below is inactive/closed (**select one**) because:

- a new trust account has been opened
- I/the agency are now using a solicitor’s trust account
- I/the agency are now using a New Zealand Real Estate Trust Account
- I am now employed by another agency that operates a trust account
- I am now officer of an agency or partnership that operates a trust account
- I/the agency is no longer actively engaged in carrying on the business of an agent

Name of Trust account	Bank account number																	
	Bank			Branch				Account						Suffix				

**5. Effective date**

Date (dd/mm/yyyy): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**6. Name and postal address of auditor**

Name: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 Suburb: \_\_\_\_\_  
 City: \_\_\_\_\_ Postcode: \_\_\_\_\_

**7. Confirmation**

I confirm that:

- the auditor has been provided with all unaudited trust account records, including unused trust receipt forms and cheques.
- appropriate steps have been taken to ensure no further trust account receipts are generated (delete if not applicable.)
- (for closed trust accounts) the final audit report will be sent to the Real Estate Authority in accordance with [section 22](#) of the Real Estate Agents (Audit) Regulation 2009.

Signature: \_\_\_\_\_

Name (print name): \_\_\_\_\_

Date (dd/mm/yyyy): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Position (e.g. Director): \_\_\_\_\_