**The broker acting for an agency ceases his activities**

**and the agency also ceases its activities**

**(licence revocation or suspension, death or retirement)**

**[Date]**

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

Address

City (Québec)

Postal code

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

Dear Client:

Please note that as of [date], the **[name of agency]** agency **[has ceased** or **will cease]** its activities and that **[name of broker]** **[has also ceased** or **will also cease]** his/her activities.

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, your contract **[is** or **will be]** consequently cancelled as of that date.

You may therefore choose to enter into a brokerage contract with any other agency or broker acting on his own account of your choice.

**[salutation]**

**[signature]**