APPLICATION FOR ACTIVATION OF BROKER LICENSE

State Form 55647 (8-14)

INDIANA REAL ESTATE COMMISSION
PROFESSIONAL LICENSING AGENCY
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Telephone: (317) 234-3009
E-mail: pla9@pla.in.gov

INSTRUCTIONS: Please type or print clearly in ink.

*Your Social Security number is being requested by this state agency in accordance with Indiana Code. Disclosure is mandatory, and this record cannot be processed without it.

FOR OFFICE USE ONLY

Application fee	Date fee paid (month, day, year)	Receipt number

DO NOT WRITE ABOVE THIS LINE

SECTION A - LICENSEE INFORMATION

Name (*last, first, middle, maiden or previous*)		License number to be activated
Current residential address (*number and street or rural route, city, state, and ZIP code*)		
Social Security number *	Date of birth (*month, day, year*)	Place of birth
Work telephone number ( )	Other telephone number (*home or cell*) ( )	E-mail address (*required*)

SECTION B - CONTINUING EDUCATION REQUIREMENTS TO ACTIVATE A BROKER LICENSE

If you received a broker license by completing a broker course and the required exam, you must complete the twelve (12) hours of continuing education that is due for the current licensing year to qualify for activation.

If you received a broker license by operation of law because your salesperson license was in inactive or referral status on July 1, 2014, you must complete the twenty-four (24) hour broker educational course to qualify for activation.

SECTION C - CONTINUING CERTIFICATES

You must attach copies of your continuing education certificates. Your application cannot be processed without them.

SECTION D - REACTIVATION QUESTIONS

If your answer is **"Yes"** to any question 1 - 4, explain fully in a signed and notarized statement, including all related details. Include the violation, location, date, disposition, and court records. Letters from attorneys are not acceptable in lieu of your statement. Falsification of any of the following is grounds for permanent revocation of a license or permit issued pursuant to this application.

1. *Except for minor violations of traffic laws resulting in fines, and arrests or convictions that have been expunged by a court,*
   (1) have you ever been arrested;
   (2) have you ever entered into a prosecutorial diversion or deferment agreement regarding any offense, misdemeanor, or felony in any state;
   (3) have you ever been convicted of any offense, misdemeanor, or felony in any state;
   (4) have you ever pled guilty to any offense, misdemeanor, or felony in any state; or
   (5) have you ever pled *nolo contendre* to any offense, misdemeanor, or felony in any state?
   ☐ Yes ☐ No
2. Have you ever been denied a license, certification, registration or permit to practice real estate or any other profession in this or any other state? ☐ Yes ☐ No
3. Has any complaint been filed against you in the State of Indiana, or in any other state, regarding any professional license you currently hold or have previously held, or have you practiced real estate or appraising as defined by IC 25-34.1 without a license? ☐ Yes ☐ No
4. Has disciplinary action ever been taken regarding any professional license, certification, registration, or permit that you currently hold or have previously held? ☐ Yes ☐ No

SECTION F - APPLICANT AFFIRMATION

I hereby swear or affirm, under the penalties of perjury, that the statements made in this application are true, correct, and complete.

Signature of applicant	Date *(month, day, year)*

AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby authorize, request and direct any person, firm, officer, corporation, association, organization or institution to release to the Professional Licensing Agency, of the Real Estate Commission, any files, documents, records or other information pertaining to the undersigned requested by the Agency, or the Board, or any of its authorized representatives in connection with processing my application for licensure.

I hereby release the aforementioned persons, firms, officers, corporations, associations, organizations and institutions from any liability with regard to such inspection or furnishing of any such information.

I further authorize the Professional Licensing Agency, or the Real Estate Commission, to disclose to the aforementioned persons, firms, officers, corporations, associations, organizations and institutions any information which is material to my application, and I hereby specifically release the Agency and the Board from any and all liability in connection with such disclosures.

A photostatic copy of this authorization has the same force and effect as the original.

AFFIRMATION

I hereby swear or affirm that I have read the above statements and agree to same.

Signature of applicant	Date *(month, day, year)*