



Name _____

Address _____

City _____

State _____

Zip Code _____

Info to renew online is below. To renew by mail - please return this entire page to the address above after answering all questions on the form. Be sure to enclose the renewal fee (\$39.25). Checks should be payable to: "Indiana Professional Licensing Agency". Please include \$50.00 late fee if postmarked after 6/30/2012.

Real Estate Salesperson Renewal Form

DATE EXPIRES	RENEWAL FEE	<p>I wish to have my license status remain the same as indicated on this application. I wish to have my Active license placed into Inactive status. I wish to have my Unassigned license placed into Inactive status. I wish to have my Active license placed into Referral status with the same co./broker.</p> <p><u>SINCE YOU LAST RENEWED YOUR LICENSE: (if yes to any question, attach details of action taken)</u></p> <p>1. Has any professional license, certificate, registration, or permit you hold or have held been disciplined <i>or</i> are formal charges pending? (circle YES or NO) YES NO</p> <p>2. Have you been denied a license, certificate, registration, or permit in any state? (circle YES or NO) YES NO</p> <p>3. Have you been convicted of or pled guilty to a violation of a federal or state law <i>or</i> are criminal charges pending? (circle YES or NO) YES NO</p> <p>4. <u>You may not renew your license until you have completed the required continuing education.</u> Have you completed the continuing education required prior to the date of submission of this application? YES NO</p> <p><u>You must sign and date and include an email below. By signing this form, you are attesting that the information on this renewal is true and correct and that you have met all required continuing education hours if applicable. This form will be returned if it is not correctly completed which will delay the renewal.</u></p>
06/30/2012		
LICENSE NUMBER	CURRENT STATUS	
SP		
MAILING ADDRESS CORRECTION:		
Signature _____		Date _____
		Email Address _____

- **Renew Online:** Go to www.pla.in.gov and select the License Express link. Your Login ID is your primary license number. Password is the last four digits of your social security number. You can update your address and other demographic information during the renewal process or any other time by logging in to your records online.
- **Active Status:** If your current license status is "Active" and you wish to renew in the same status, you must have completed the sixteen (16) hours of continuing education described in 876 IAC 4-2-1.
- **Inactive Status:** If your current license status is "INACTIVE", you must renew the license under that same status. If you wish to change the status from "INACTIVE" to "ACTIVE", you will need to complete the 16 required hours of continuing education, submit copies of these hours, a \$10 fee and the completed application for License Activation, www.in.gov/icpr/webfile/formsdiv/47330.pdf to Indiana Professional Licensing Agency. If you need to change your status from "INACTIVE" to "REFERRAL" status, you will need to complete a Reassignment Form, www.in.gov/icpr/webfile/formsdiv/47478.pdf and mail the completed form and the \$10.00 fee to Indiana Professional Licensing Agency.
- **Referral Status Only:** If your current status is "REFERRAL", you must renew the license under the same. If you wish to change the status from "REFERRAL" to "ACTIVE", you will need to complete the license activation form www.in.gov/icpr/webfile/formsdiv/47330.pdf AFTER you have renewed the license under the current "REFERRAL" status. If your license is placed in "REFERRAL" status, you are *not* required to obtain continuing education.
- **Unassigned Status:** If your current status is "UNASSIGNED", you must renew the license under the same status unless you wish to place the license into the "INACTIVE" status. If you wish to change the status from "UNASSIGNED" to "ACTIVE", you will need to complete the Reassignment form www.in.gov/icpr/webfile/formsdiv/47478.pdf as required by 876 IAC 1-1-19 AFTER renewing the license under the current "UNASSIGNED" status.
- **Waiver of Continuing Education:** The continuing education requirement may be waived if you have actively served in the armed forces of the United States for one (1) year or more of the two (2) year license period; or have had an incapacitating illness which has prevented either part-time or full-time employment for at least twelve (12) months of the two (2) year license period. Please note that any request for waiver must be accompanied by verifying documentation of active service in the military or of the medical disability which has prevented you from completing the education requirement. To apply for a waiver, complete and submit the Application for Waiver of Continuing Education with this renewal application. The Commission must review the application prior to your expiration date. This application is available at www.in.gov/icpr/webfile/formsdiv/48359.pdf.
- **Contact Information:** Should you have any questions or concerns about this renewal process, please contact us by email at pla9@pla.in.gov, or by phone at (317) 234-3009.