



ND REAL ESTATE COMMISSION
1110 College Dr. Suite 207
PO Box 727
Bismarck ND 58502-0727
SFN 12164 (6/13)

APPLICATION TO ISSUE REAL ESTATE LICENSE

Please check one of the following:

I wish to have my North Dakota Real Estate Broker's/Salesperson's license issued on or about:

Date

I do not wish to have my license issued at this time. Please retain my license on an inactive status with your office until I advise you otherwise.

Date

Part A. BROKER

THIS SECTION IS TO BE COMPLETED BY PERSONS REQUESTING ISSUANCE OF THEIR LICENSE AS A BROKER.

1. Name of broker applicant:

First	Full Middle	Last
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2. Business Address:

Street Address	City	State	Zip Code + 4
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3. Firm or trade name under which you will be doing business or firm with whom you will be associated:

Part B. SALESPERSON OR BROKER ASSOCIATE

THIS SECTION IS TO BE COMPLETED BY PERSONS REQUESTING ISSUANCE OF THEIR LICENSE AS A SALESPERSON OR BROKER ASSOCIATE.

1. Name of salesperson or broker associate:

First	Full Middle	Last
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2. Residence Address:

Street Address	City	State	Zip Code + 4
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Mailing Address (if different from above):

PO Box	City	State	Zip Code + 4
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3. Name of the broker's firm with whom you will be associated:

4. Business Address:

Street Address	City	State	Zip Code + 4
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Signature of Salesperson or Broker Associate

Part C. CERTIFICATION OF BROKER

THIS SECTION IS TO BE COMPLETED BY THE BROKER WITH WHOM THE SALESPERSON OR BROKER ASSOCIATE WILL BE ASSOCIATED. IF PART B OF THIS APPLICATION HAS BEEN COMPLETED, PART C MUST ALSO BE COMPLETED.

I, a duly licensed real estate broker do hereby request that a real estate salesperson's or broker associate's license be issued to

The aforementioned individual will be associated with my firm and will be under my supervision. I believe the applicant to be honest, truthful, of good reputation and competent to transact business as a real estate salesperson or broker associate.

PROSPECTIVE BROKER'S SIGNATURE	DATE
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