



**APPLICATION TO ISSUE REAL ESTATE LICENSE**  
**NORTH DAKOTA REAL ESTATE COMMISSION**  
 SFN 12164 (02/2021)

1120 College Dr Ste 204  
 Bismarck ND 58501  
 Phone: (701) 328-9749  
 Email: ndrec@nd.gov  
 Website: realestatend.org

Please check one of the following:

Date
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- I wish to have my North Dakota Real Estate Broker's/Salesperson's license issued on or about:
- 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. Inactive licenses must be renewed annually by November 15. The ND Real Estate Commission will communicate with me primarily by the email listed below and I must notify the NDREC of an email address change.

**Part A. BROKER**

*THIS SECTION IS TO BE COMPLETED BY PERSON REQUESTING ISSUANCE OF THEIR LICENSE AS A BROKER*

Print Broker Applicant Name (First, Last)			
Email Address			
Residence Address	City	State	ZIP Code
Mailing Address (if different from above)	City	State	ZIP Code
Firm or Trade Name with whom you will be associated			
Business Address	City	State	ZIP Code
Mailing Address (if different than above)	City	State	ZIP Code
Signature of Broker Applicant			Date

**Part B. SALESPERSON OR BROKER ASSOCIATE**

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

Print Salesperson or Broker Associate Name (First, Last)			
Email Address			
Residence Address	City	State	ZIP Code
Mailing Address (if different from above)	City	State	ZIP Code
Firm or Trade Name with whom you will be associated	Firm License Number	Is this a branch office? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Business Address	City	State	ZIP Code
Signature of Salesperson or Broker Associate Applicant			Date

I, the employing broker, request that a real estate salesperson's or broker associate's license be issued to this applicant.

Print Employing Broker's Name (First, Last)	
Employing Broker's Signature	Date