ND REAL ESTATE COMMISSION
1110 College Dr. Suite 207
PO Box 727
Bismarck ND 58502-0727
(09/15)

For Official Use Only
Date Mailed: _____
Receipt No. _____
Date Posted: _____

APPLICATION TO ISSUE DUPLICATE REAL ESTATE LICENSE - $25

Select the type of additional license that you are applying for (check one):

- ☐ **Broker** ☐ Replacement ☐ Duplicate (Broker only)
- ☐ **Broker Associate** ☐ Replacement
- ☐ **Salesperson** ☐ Replacement

IDENTIFYING AND CONTACT INFORMATION

1. Full Name: _____
   First Middle Last
2. Residential Address: _____
   Street address
   _____
   City State Zip Code
3. Mailing Address: _____
   PO Box City State Zip Code

4. Firm or trade name under which you are doing business or firm with whom you are associated: _____

5. Business Address: _____
   Street Address or PO Box
   _____
   City State Zip Code

Signature of Salesperson or Broker Associate: _____

_____
Date License Number

Signature of Broker/Employing Broker: _____
Date