

CERTIFICATE OF LICENSURE REQUEST



NORTH DAKOTA REAL ESTATE COMMISSION
1110 College Dr., Suite 207
PO Box 727
Bismarck ND 58502-0727
(9/15)

FOR OFFICIAL USE ONLY

Date mailed: _____

Receipt No. _____

Date posted: _____

CERTIFICATE OF LICENSURE FEE - \$25.00

SECTION A	LICENSE INFORMATION
Name as it appears on the license:	
License #	

SECTION B	ORDER
Number of Certificates:	Fee : \$25 each _____ X \$25 = \$ _____

SECTION C	DELIVERY
<input type="checkbox"/>	Send the original Certificate of Licensure to the real estate licensing agency in the state of _____
<input type="checkbox"/>	Send the original Certificate of Licensure to me at this address: _____ _____
<input type="checkbox"/>	Please update Agency records with the personal mailing address.
<input type="checkbox"/>	Email the Certificate of Licensure to me at this address: _____

Signature: _____ Date: _____

Return completed, signed form with check or money order payable to:

North Dakota Real Estate Commission
1110 College Dr., Suite 207
PO Box 727
Bismarck, ND 58502-0727