



**STATE OF MAINE
DEPARTMENT OF PROFESSIONAL
AND FINANCIAL REGULATION
OFFICE OF LICENSING AND REGISTRATION
INDIVIDUAL LICENSE APPLICATION**

APPLICANT INFORMATION (please print)			
FULL LEGAL NAME			
ANY OTHER NAMES EVER USED:			
DATE OF BIRTH	<i>mm / dd / yyyy</i>	SOCIAL SECURITY NUMBER	- -
MAILING ADDRESS			
CITY	STATE	ZIP	COUNTY
PHONE # ()	FAX # ()	E-MAIL	
CRIMINAL BACKGROUND DISCLOSURE			
<i>NOTE: Failure to disclose criminal convictions may result in denial, fines, suspension and/or revocation of a license.</i>			
1. Have you ever been convicted by any court of any crime? (circle one) NO YES			
If yes, enclose a detailed description of what happened (including dates) and a copy of the court judgment.			
2. Has any jurisdiction taken disciplinary action against any professional license you hold or have held, or denied your application for licensure? (circle one) NO YES			
If yes, enclose a detailed explanation and copies of all documents.			
By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief. By submitting this application, I affirm that the Office of Licensing and Registration will rely upon this information for issuance of my license and that this information is truthful and factual. I also understand that sanctions may be imposed including denial, fines, suspension or revocation of my license if this information is found to be false.			
SIGNATURE		DATE	

<h2 style="color: blue;">Maine Real Estate Commission</h2> <h3 style="color: blue;">Required Fee: \$121.00 (includes criminal records check fee)</h3> <p style="color: blue;"><i>See Instructions on Page 4</i></p>			Office Use Only: 1421 - \$100.00 2619 - \$21.00
TYPE OF LICENSE REQUESTED (CHECK ONE)			<i>Office Use Only:</i> Check # _____ Amount: _____ Cash # _____ Lic. # _____ Issue Date _____ Exp. Date _____
BROKER (BR1421)	Must have been licensed as an Associate Broker affiliated with a real estate brokerage agency for 2 years within the 5 years immediately preceding the date of application. Must also complete the Designated Broker Course with a minimum final grade of 75% and include the original course completion certificate. Must apply for the broker license within 1 calendar year of completing the course.		
ASSOCIATE BROKER (BA1421)	Include EITHER associate broker course completion certificate OR sales agent examination results.		
SALES AGENT (SA1421)	Include BOTH sales agent course completion certificate AND sales agent examination results.		

PAYMENT OPTIONS:			
Make checks payable to "Maine State Treasurer" - If you wish to pay by Mastercard or Visa, fill out the following:			
NAME OF CARDHOLDER (please print)	<i>FIRST</i>	<i>MIDDLE INITIAL</i>	<i>LAST</i>
I authorize the Department of Professional and Financial Regulation, Office of Licensing and Registration to charge my			
<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	the following amount: \$ _____	
Card number:	<i>XXXX-XXXX-XXXX-XXXX</i>	Expiration Date	<i>mm / yyyy</i>
SIGNATURE		DATE	

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APPLICANT NAME: _____ BROKER ASSOCIATE BROKER SALES AGENT

EDUCATION *complete all that apply. High school diploma or equivalent is required.*

	School name	State	Year	Degree Granted
GED				
HIGH SCHOOL				
COLLEGE				

REAL ESTATE LICENSING HISTORY

Do you now hold OR have you ever held any type of Maine real estate license? NO YES **

Do you now hold OR have you ever held a real estate license in any other state or jurisdiction? NO YES **

*** (if yes, include with this application a certificate of good standing from each state or jurisdiction)*

** If yes to any question above, complete the following information:	1	2	3	4	5
Type of license held					
Licensing State					
License Expiration Date					
Date Suspended/Revoked					

**ARE YOU A MAINE RESIDENT? IF SO, YOU MAY SKIP THIS SECTION.
IF YOU ARE NOT A MAINE RESIDENT, YOU MUST FILL OUT THE INFORMATION BELOW**

LEGAL RESIDENCE (city and state):

WHEREAS I have made application for a non-resident license to practice real estate brokerage in the State of Maine in accordance with the provisions of 32 M.R.S.A., Chapter 114; and

WHEREAS, pursuant to 32 M.R.S.A. §13193 it is necessary for a non-resident license applicant to file an irrevocable consent to service agreement with the Director of the Real Estate Commission;

NOW, THEREFORE, I hereby execute and file with the Director of the Real Estate Commission this irrevocable consent that actions may be commenced against me in the proper court of any county in the State of Maine in which a cause of action may arise or in which the Plaintiff may reside, by the service of any process or pleadings authorized by the laws of the State of Maine on the Director of the Commission. Furthermore, it is hereby stipulated and agreed that service of the process or pleading on the Director shall be taken and held in all courts as valid and binding as if due service had been made upon me personally within the State of Maine.

IN WITNESS WHEREOF I have hereunto signed by name.

SIGNATURE

DATE

AGENCY AFFILIATION AND DESIGNATED BROKER RECOMMENDATION

AGENCY NAME

AGENCY LICENSE NUMBER

AGENCY EXPIRATION DATE

DESIGNATED BROKER'S NAME

DB LICENSE NUMBER

DB EXPIRATION DATE

In compliance with 32 MRSA Chapter 114, §13191, I hereby state that in my opinion the application named above bears a reputation for honesty, truthfulness, fair dealing and competency. I recommend that the applicant be granted a Maine real estate license.

DB Signature

Date

Check here if you are the Designated Broker's designee, and print name and license number below.

NAME:

LICENSE NUMBER:

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APPLICANT NAME: _____ BROKER ASSOCIATE BROKER SALES AGENT

REFERENCE STATEMENT

By providing my signature below, I hereby swear that I am not related to the applicant and that I have known the applicant for a period of at least one year. I also attest to the applicant's good reputation for honesty, truthfulness, fair dealing and competency and recommend that the license application be granted.

REFERENCE #1 - FULL LEGAL NAME:

Street or PO Box

City State & zip

Phone number Email address

Signature Date

REFERENCE #2 - FULL LEGAL NAME:

Street or PO Box

City State & zip

Phone number Email address

Signature Date

REFERENCE #3 - FULL LEGAL NAME:

Street or PO Box

City State & zip

Phone number Email address

Signature Date

US Department of Housing & Urban Development - Voluntary Information

To comply with a request from the US Department of Housing & Urban Development, we are soliciting the following information. You are NOT required to furnish this information, but your cooperation is appreciated.

Racial/Ethnic Background:

- AFRICAN AMERICAN Any persons having origins in any of the Black racial groups of Africa (not of Hispanic origin).
- CAUCASIAN All persons having origins in any of the original people of Europe, North Africa or the Middle East (not of Hispanic origin).
- HISPANIC Any persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
- ASIAN or PACIFIC ISLANDER All persons having origin in any of the original peoples of the Far East, Southeast Asia, the Indian Sub-continent or the Pacific Islands. This includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.
- AMERICAN INDIAN or ALASKAN NATIVE All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.

Sex: Female Male

Frequently Asked Questions:

- **Where do I send my application?** Our mailing address is 35 State House Station, Augusta, Maine 04333-0035
- **Where are you located?** 76 Northern Avenue, Gardiner, Maine.
- **What hours are you open?** 8:00 AM to 5:00 PM weekdays
- **Can I come to Gardiner to drop off my application?** Yes. You will not leave with a license, though.
- **Can I come to Gardiner to pick up my license?** No. Your license will be mailed to you.
- **How long does it take to process an application?** You can check our website: www.maine.gov/professionallicensing. Your license will show up as PENDING at first; as soon as your status is ACTIVE you are authorized to practice.
- **How far back do I go answering the criminal question?** Any conviction, ever.

NOTES REGARDING PARTICULAR REAL ESTATE LICENSE TYPES:	
Sales Agent	You must apply for licensure within one year of passing the Sales Agent Exam.
Associate Broker	If you qualified for your Sales Agent license by passing the state sales agent exam, you must include your original Associate Broker course completion certificate with this application. If you qualified for your Sales Agent license by passing the Introduction to Real Estate Course, you must include your original Pearson VUE (formerly known as Promissor) Sales Agent Examination results with this application.
Broker	You must have been licensed as an Associate Broker affiliated with a real estate brokerage agency for 2 years within the 5 years immediately preceding the date of application submitted to the Commission. You must also complete the Designated Broker Course with a minimum final grade of 75% and submit the original course completion certificate with the application. Must apply for the broker license within one calendar year of completing the course.
Reciprocal Candidate or former licensees	You must apply for a license within one year of passing the Maine Law Examination. Submit your original Maine Law Examination results with this application. You must also include original certificates of good standing from any jurisdiction where you hold or have held a real estate license. These certificates must be less than thirty days old.

NOTICES

BACKGROUND CHECK: Pursuant to 5 M.R.S.A. §5301 - 5303, the State of Maine is granted the authority to take into consideration an applicant's criminal history record. The Office of Licensing and Registration requires a criminal history records check as part of the application process for all applicants.

PUBLIC RECORD: This application is a public record for purposes of the Maine Freedom of Access Law (1 MRSA §401 et seq). Public records must be made available to any person upon request. This application for licensure is a public record and information supplied as part of the application (other than social security number and credit card information) is public information. Other licensing records to which this information may later be transferred will also be considered public records. Names, license numbers and mailing addresses listed on or submitted as part of this application will be available to the public and may be posted on our website.

SOCIAL SECURITY NUMBER: The following statement is made pursuant to the Privacy Act of 1974 (§7(B)). Disclosure of your Social Security Number is mandatory. Solicitation of your Social Security Number is solely for tax administration purposes, pursuant to 35 MRSA §175 as authorized by the Tax Reform Act of 1975 (42 USC §405(C)(2)(C)(1)). Your Social Security Number will be disclosed to the State Tax Assessor or an authorized agent for use in determining filing obligations and tax liability pursuant to Title 36 of the Maine Revised Statutes. No further use will be made of your Social Security Number and it shall be treated as confidential tax information pursuant to 36 MRSA §191.

Before you seal the envelope, did you:

- Complete every item on the application (incomplete applications may be returned)
- Answer the criminal background disclosure questions
- Sign and date your application
- Include correct amount (payable to Maine State Treasurer) or credit card information (plus signature)
- Include any required transcripts or exam results
- Make a copy of your application to keep for your records
- DO NOT SEND CASH.