



**STATE REAL ESTATE COMMISSION**  
PO Box 2649  
Harrisburg PA 17105-2649

Phone Number 717-783-3658  
Fax Number: 717-787-0250  
[www.dos.pa.gov/estate](http://www.dos.pa.gov/estate)

## **RENTAL LISTING REFERRAL AGENT (CORP LLC PARTNER) INITIAL APPLICATION**

Make sure this is the most recent application by checking our website. Failure to submit a current application could result in delays while processing your application.

PLEASE READ THE FOLLOWING BEFORE PROCEEDING WITH THE APPLICATION PROCESS

If a pending application is older than one year from the date submitted and the applicant wishes to continue the application process, the Commission shall require the applicant to submit a new application including the required fee.

In order to complete the application process, many of the supporting documents associated with the application cannot be more than six months from the date of issuance. All background check documents cannot be older than 90 days from the date of issuance.

Failing to answer any questions or providing false answers may result in the refusal of a license or subsequent disciplinary action once the license is issued.

**Licenses are not forwarded.** Provide your current address to receive correspondence from the Commission. It is the applicant's responsibility to inform the Commission of an address or name change within ten (10) days of the change.

### **INSTRUCTIONS**

1. The application responses must either be typed or printed in blue or black ink.
2. A separate application for the manager of record must accompany this application. You can apply online or visit our website to download the form, [www.dos.pa.gov/estate](http://www.dos.pa.gov/estate)
3. Fictitious names may not be false, misleading, or deceptive. Information about corporate filings or fictitious names should be directed to the Pennsylvania Corporation Bureau online at [www.dos.pa.gov/corps](http://www.dos.pa.gov/corps).
4. Signs must include the phrase "Rental Listing Referral Agent."

## **APPLICATION CHECKLIST**

Attach the following documents to this application:

- Check or money** order made payable to the Commonwealth of Pennsylvania.
  - INITIAL LICENSURE – \$169.50 – Includes \$94.50 licensure fee and \$75.00 application fee.
  - If you have NEVER held a Pennsylvania real estate license, add \$10.00 for the recovery fund fee = \$179.50.
  - All fees are NON-REFUNDABLE regardless of whether a license is issued. A \$20.00 processing fee will be charged for any returned unpaid check.
  
- Completed Manager of Record Application**
  
- A photocopy of the Pennsylvania Corporation Bureau-approved Articles of Incorporation** (for corporations), **Certificate of Registration** (for partnerships), **or Certificate of Authority** (for out of state entities).
  
- Photocopy of the Pennsylvania Corporation Bureau-approved Fictitious Name Registration (if applicable)** – If you are adding, deleting, or amending a fictitious name, the approval must be submitted.

## **PROCESSING INFORMATION**

- Please see the Commission's website [www.dos.pa.gov/estate](http://www.dos.pa.gov/estate) for additional information about licensure and application requirements.
- To check the status of your application or to apply online visit [www.mylicense.state.pa.us](http://www.mylicense.state.pa.us)

**A \$55.00 RE-INSPECTION FEE WILL BE CHARGED WHENEVER THERE IS A FAILED INSPECTION.**

**YOU MAY NOT PRACTICE UNTIL THE COMMISSION ISSUES YOUR LICENSE**



STATE REAL ESTATE COMMISSION  
PO Box 2649  
Harrisburg PA 17105-2649

Phone Number 717-783-3658  
Fax Number: 717-787-0250  
www.dos.pa.gov/estate

**RENTAL LISTING REFERRAL AGENT (CORP LLC PARTNER)**

- 1. Entity's name: \_\_\_\_\_
- 2. Entity's trade name (if applicable): \_\_\_\_\_
- 3. Entity's address: \_\_\_\_\_  
(Street)

\_\_\_\_\_  
 (City) (State) (Zip)

- 4. Office phone number: ( \_\_\_ \_\_\_ \_\_\_ ) \_\_\_ \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ \_\_\_
- 5. Office website address: \_\_\_\_\_

6. Does the rental listing referral agent's contracts contain the following statement in bold print:

**"WE ARE A REFERRAL SERVICE ONLY. WE ARE NOT ACTING AS REAL ESTATE SALESPERSONS OR BROKERS. WE DO NOT GUARANTEE THAT THE PURCHASER WILL FIND A SATISFACTORY RENTAL UNIT THROUGH OUR SERVICES. OUR ONLY PURPOSE IS TO FURNISH THE PURCHASER WITH LISTS OF AVAILABLE RENTAL UNITS."**

No  Yes

7. Does any officer, partner, member and/or owner hold, or have they ever held, a license, certificate, permit, registration or other authorization to practice a profession or occupation in any state or jurisdiction?  No  Yes

8. If you answered yes to the above question, please provide the profession and state or jurisdiction. Please do not abbreviate the profession.  
 Profession: \_\_\_\_\_ State: \_\_\_\_\_

9. Has any officer, partner, member and/or owner had disciplinary action taken against a professional or occupational license, certificate, permit, registration or other authorization to practice a profession or occupation issued to them in any state or jurisdiction or have they agreed to voluntary surrender in lieu of discipline?  No  Yes

10. Does any officer, partner, member and/or owner currently have any disciplinary charges pending against their professional or occupational license, certificate, permit or registration in any state or jurisdiction?  No  Yes

11. Has any officer, partner, member and/or owner been convicted (found guilty, pled guilty or pled nolo contendere), received probation without verdict or accelerated rehabilitative disposition (ARD), as to any criminal charges, felony or misdemeanor, including any drug law violations? Note: You are not required to disclose any ARD or other criminal matter that has been expunged by order of a court.  
 No  Yes

12. Does any officer, partner, member and/or owner currently have any criminal charges pending and unresolved in any state or jurisdiction?  No  Yes

**(CONTINUED ON NEXT PAGE)**

Disciplinary action includes any revocation, suspension, voluntary surrender, reprimand, probation, civil penalty or any restriction in practice. If any disciplinary action has been taken against any license in any state, submit all documentation about the disciplinary action.

Conviction includes a finding or verdict of guilt, an admission of guilt, a plea of nolo contendere or receiving probation without verdict, disposition in lieu of trial or an Accelerated Rehabilitation Disposition in the disposition of criminal charges. Only felony and misdemeanor convictions must be reported to the Commission. If a conviction has occurred in any state that has not yet been reported to the Commission, submit all documentation about the conviction. If you answered "Yes" to any of the disciplinary or conviction questions, provide complete details as well as certified copies of relevant documents.

**MANAGER OF RECORD INFORMATION**

13. Name of proposed manager of record: \_\_\_\_\_

14. License number of proposed manager of record: \_\_\_\_\_  
(If not issued, "pending")

15. Manager of record phone number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

16. Manager of record email address: \_\_\_\_\_

Check here if you would like to receive communications regarding your application via email. If you check this box, please be sure to add [ra-realestate@pa.gov](mailto:ra-realestate@pa.gov) to your address book.

**Check box if claiming a Business fee exemption for veteran-owned and reservist-owned small business under Act 135 of 2016 (51 Pa.C.S. §§ 9610-9611)**

Under Act 135 of 2016, veterans and reservists starting or opening a small business in the Commonwealth are exempt from the payment of a business fee effective January 2, 2017. Therefore, the board will waive the initial application fee for veteran- or reservist-owned small businesses as follows:

1. The veteran/reservist owner(s) must certify below that they are starting a small business in the Commonwealth. A **small business** must be independently owned, not dominant in its field of operation and employ 100 or fewer employees. The business must be owned AND controlled by a veteran or reservist. For businesses with multiple owners, at least 51% of the ownership interest must be held by veterans/reservists to claim the exemption.
2. The veteran/reservist owner(s) must attach proof of the veteran's or reservist's status at the time the initial application is submitted. Such proof includes a legible photocopy of:
  - A Federal DD-214 form
  - A Federal NGB-22 form
  - A valid Federal Veterans' Administration card or
  - A valid Department of Defense-issued military identification card

**CERTIFICATION STATEMENT:**

I hereby certify that I am applying for this license in order to start or open a small business in the Commonwealth of Pennsylvania as defined above, that I am a veteran or reservist as evidenced by the attached documentation, and that at least 51% of the ownership of the small business is veteran- or reservist-owned.

\_\_\_\_\_  
Signature of veteran/reservist applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of veteran/reservist applicant

\*\* Use additional sheets as necessary for each veteran/reservist owner

APPLICANT'S CERTIFICATION

By submitting this information, I verify that this application is in the original format as supplied by the Department of State and has not been altered or otherwise modified in any way. I am aware of the criminal penalties for tampering with public records or information under 18 Pa.C.S. § 4911. I verify that the statements in this application are true and correct to the best of my knowledge, information and belief. I understand that false statements are made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) and may result in the suspension, revocation or denial of my license, certificate, permit or registration.

---

(Manger of Record's Signature)

(Date)