



**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)

## **SALESPERSON RECIPROCAL INITIAL LICENSE 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

Applicants must be at least 18 years of age.

If your state of licensure is not listed, please do not proceed with this application type. You will need to apply for a salesperson standard license. The Pennsylvania Real Estate Commission has reciprocity with the following states:

Arkansas	Georgia	Louisiana	Maryland
Massachusetts	New York		

To qualify for a reciprocal license you must maintain a current license in your primary state in order to renew your reciprocal Pennsylvania license. You are required to notify the Commission within 30 days of any change to your primary license. If your primary license is not active at the time of renewal, you cannot renew, and must apply for a standard license.

You must meet both of the following requirements:

1. Hold a current, active equivalent license in another state, having been so obtained by examination in a state that has entered into a reciprocal agreement with this Commission
2. Your principal place of business is in another state

Licensees who wish to use and advertise a nickname for their first name shall include the nickname on their licensure applications or biennial renewal applications.

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 delay the issuance of a license or result in disciplinary action once the license is issued.

**SOCIAL SECURITY NUMBER DISCLOSURE:** NOTICE: Disclosing your Social Security Number on this application is mandatory in order for the State Boards to comply with the requirements of the Federal Social Security Act pertaining to Child Support Enforcement, as implemented in the Commonwealth of Pennsylvania at 23 Pa.C.S. § 4304.1(a). At the request of the Department of Human Services (DHS), the licensing boards must provide to DHS information prescribed by DHS about the licensee, including the social security number.

**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. Refer to the "Name/Address Change" form located on our website.

**PLEASE NOTE: Providing your e-mail address on this form permits the Commission to correspond with you via e-mail regarding the status of this application. Please make sure to add [ra-realestate@pa.gov](mailto:ra-realestate@pa.gov) to your Contacts so that you do not miss vital communications regarding your license.**

### **INSTRUCTIONS**

1. The application responses must either be typed or printed in blue or black ink.
2. Broker Information - Use the name, address, and license number exactly as it appears on the broker's license. If the employing broker is a corporation or partnership, use that name, address, and license number.
3. Employer Certification – The employer certification must be signed by the broker or broker of record if the employing broker is a corporation or partnership.

### **APPLICATION CHECKLIST**

Attach the following documents to this application:

- Check or money order made payable to the Commonwealth of Pennsylvania.**
  - **\$107.00** – includes \$72.00 licensure fee, \$25.00 application fee and \$10.00 for the real estate recovery fund fee.
  - 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.
- Criminal Background Check completed by the State Police of every state where the applicant has resided in the five years immediately preceding the date of this application. All background checks must be dated within 90 days of the date this application is received in the Commission office.**
  - If you reside in Pennsylvania, background checks may be obtained online at: <https://epatch.state.pa.us>
  - If you reside outside the state of Pennsylvania, you must obtain a background check from the State Police in that state.
  - The background check must contain the Applicant's **date of birth and social security number.**
  - The background check must either state "**No Record**" or "**Record Exists.**" Background checks that reflect "**Pending**" "**Under Review,**" or "**Under Request**" cannot be submitted. Questions regarding the status of a background check must be directed to the State Police.
  - If "**Record Exists**"—submit **originals** of the following for EACH conviction:
    - The conviction summary information provided by the State Police;
    - Certified copies of ALL court documents;
    - Letter from the probation office, dated within 90 days, indicating current probationary status/completion date;
    - Employment History (resume);
    - Detailed description (in applicant's words) of the circumstances surrounding the conviction, the basis for the conviction and the disposition of the conviction;
    - A signed and dated reference letter from the employing broker, on the company's letterhead, indicating that the broker is aware of all conviction(s) and is willing to hire the applicant;
    - Two signed and dated character references from individuals who are not related to or residing with the applicant.

☐ **Certification of Licensure/Letter of Good Standing –**

- Accompanying this application must be a Certification of Licensure or Letter of Good Standing from the state where you passed the real estate salesperson licensure examination and that has a reciprocal agreement with this Commission. The Certificate/Letter MUST be dated within 90 days of the date this application is received in the Commission office.

- ☐ **Documentation regarding discipline (if applicable).** If your real estate license in another state or other professional license in any state has been the subject of discipline, submit all documentation related to the disciplinary action.

**PROCESSING INFORMATION**

- Licenses are mailed to the employing broker's main office address.
- 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.pa.gov](http://www.mylicense.pa.gov)

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1. Applicant's Legal Name: \_\_\_\_\_

2. Applicant's Nickname (if applicable): \_\_\_\_\_

3. Applicant's Home Address: \_\_\_\_\_  
(Street)

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

4. Applicant's Email Address: \_\_\_\_\_

**PLEASE NOTE: Providing your e-mail address on this form permits the Commission to correspond with you via e-mail regarding the status of this application. Please make sure to add [ra-realestate@pa.gov](mailto:ra-realestate@pa.gov) to your Contacts so that you do not miss vital communications regarding your license.**

5. Applicant's Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

6. Applicant's Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

7. Applicant's Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

8. Select your state of reciprocity:

- Arkansas  Georgia  Louisiana  Maryland  Massachusetts  New York

**BROKER INFORMATION AS IT APPEARS ON THEIR LICENSE:**

9. Employing Broker's Office Name: \_\_\_\_\_

10. Employing Broker's Office Address: \_\_\_\_\_  
\_\_\_\_\_

11. Employing Broker's License Number: \_\_\_\_\_  
(RB/SB/RBR/SBR#)

**APPLICANT BACKGROUND INFORMATION:**

12. Do you hold, or have you ever held, a license, certificate, permit, registration or other authorization to practice a profession or occupation in any state or jurisdiction?  No  Yes

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

14. Have you had disciplinary action taken against a professional or occupational license, certificate, permit, registration or other authorization to practice a profession or occupation issued to you in any state or jurisdiction or have you agreed to voluntary surrender in lieu of discipline?  No  Yes

15. Do you currently have any disciplinary charges pending against your professional or occupational license, certificate, permit or registration in any state or jurisdiction?  No  Yes

- 16. Have you withdrawn an application for a professional or occupational license, certificate, permit or registration, had an application denied or refused, or for disciplinary reasons agreed not to apply or reapply for a professional or occupational license, certificate, permit or registration in any state or jurisdiction?  No  Yes
- 17. Have you 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
- 18. Do you currently have any criminal charges pending and unresolved in any state or jurisdiction?  No  Yes

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.

**EMPLOYER’S CERTIFICATION**

I do hereby request that a license be granted to \_\_\_\_\_ to provide real estate services at this office. I certify that the above applicant bears a good reputation for honesty, trustworthiness, integrity and competence and I will actively train and supervise the applicant as required by Real Estate Licensing and Registration Act and the Commission’s Regulations.

\_\_\_\_\_  
(Broker’s Signature)

\_\_\_\_\_  
(License Number)

\_\_\_\_\_  
(Date)

**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.

\_\_\_\_\_  
(Applicant’s Signature)

\_\_\_\_\_  
(Date)

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