



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

**BROKER SOLE PROPRIETOR CHANGE APPLICATION
 CHANGE OF LOCATION – CHANGE OF NAME - REACTIVATION
 STANDARD AND RECIPROCAL**

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.

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.

To qualify for a reciprocal license, you must meet both of the following requirements:

1. Hold a current, active equivalent or broker 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 principle place of business is in another state

Note: 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 and pass the state portion of the Real Estate Examination

INSTRUCTIONS

1. The application responses must either be typed or printed in blue or black ink.
2. Members of a real estate association or organization may use a name that connotes membership in the association/organization, provided that membership is continued.
3. If you are practicing under a fictitious name, that name must first be registered with the Pennsylvania Corporation Bureau. Questions about fictitious names should be directed to the Corporation Bureau online at www.dos.pa.gov/corps.

4. The applicant must disclose whether they engaged in practice as a sole proprietor while the license was inactive or expired. An additional \$5.00 per month must be paid for each month the applicant practiced without a current license.

APPLICATION CHECKLIST

Attach the following documents to this application:

- Check or money order made payable to the Commonwealth of Pennsylvania.**
 - **Reactivation of an Expired License - \$201.00**
 - **\$5.00 per month late fee, if the business practiced on an expired/inactive license.**
 - **NAME CHANGE**
 1. **\$75.00** for the main location
 2. **\$20.00** for each licensee, including associate brokers and salespersons.
 - **ADDRESS CHANGE**
 1. **\$75.00** for the main location
 - **\$20.00** for each licensee, including associate brokers and salespersons.
 - **A \$55.00 reinspection fee will be charged whenever there is a failed inspection.**
 - 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.

- All original wall certificates, including the sole proprietor and any associate broker or salespersons licenses, must be returned.**

- Criminal Background Check completed by the State Police where the applicant resides and dated within 90 days of the date this application is received in the Commission office.**
 - **If you have a current Pennsylvania license, it is not necessary for you to obtain a background check.**
 - **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 court documents;
 - Letter from the probation office, dated within 90 days, indicating current probationary status/completion date;
 - Police incident reports;
 - 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 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.

- ❑ **Photocopy of the Pennsylvania Corporation Bureau-approved Fictitious Name Registration (if applicable)** - Fictitious names may not be false, misleading, or deceptive.
- ❑ **Bank Escrow Verification Letter** – Sole proprietors must have an escrow account, regardless of whether the account will be used. The broker must be an authorized signatory on the account. Applicants must submit an original letter from their bank verifying the entity name and identifying authorized signatories on the account.
- ❑ **Certification of Licensure (if applicable)** – If the entity maintains its office in another state, a Certificate of Licensure or Letter of Good Standing from that state's Real Estate Commission must be submitted. The Certification must be dated within 90 days of the date the application is received in this office.
- ❑ **Documentation regarding discipline (if applicable)**
- ❑ **Official Transcripts – (if applicable)** Showing completion of 14 hours of Commission-approved continuing education courses completed within 2 years preceding the date of submission of this application UNLESS the applicant holds another current Pennsylvania real estate license. Courses used to reactivate a license may not be reused to renew the license at renewal time. An additional 14 hours of continuing education will be required.

If your license is currently inactive or expired, you have five years from the date of inactivity or expiration to reactivate your license without taking the licensing examinations. Your completed application for reactivation must be received in our office before your five year deadline. A completed application includes the reactivation fee, criminal background check, conviction documents (if applicable), and continuing education certificates. Applications will not be considered complete if they are faxed or emailed, as a fee cannot be submitted in this manner.

- ❑ **Exam Results – (if applicable)** If the license was expired for more than 5 years, submit original notices from the testing service evidencing a passing score on both portions of the real estate broker examination within 3 years of the date this application is received in the Commission Office – Applicants who have held a current license from another state within the last 5 years, and are not applying for reciprocity, must provide proof of passing the state portion of the examination only.

Per Section 501(b) of the Real Estate Licensing and Registration Act, "Any person who remains inactive for a period of five years without renewing his license shall, prior to having a license reissued to him, submit to and pass the examination pertinent to the license for which the person is reapplying".

PROCESSING INFORMATION

- You should maintain a copy of this application until a license has been issued.
- Please see the Commission's website 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

STANDARD LICENSE APPLICANTS - YOU MAY NOT PRACTICE UNTIL YOU HAVE RECEIVED TEMPORARY AUTHORIZATION FROM THE INSPECTOR AFTER PASSING INSPECTION.

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

RECIPROCAL LICENSE APPLICANTS – YOU MAY NOT PRACTICE UNTIL AFTER A LICENSE HAS BEEN ISSUED.



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SELECT APPLICATION TYPE:

CHANGE OF LOCATION CHANGE OF NAME REACTIVATION

1. Applicant's Legal Name: _____
2. Applicant's Trade Name: _____
3. Applicant's License Number: _____
4. **If reactivating an inactive or expired license**, have you provided real estate services as a sole proprietor while this license was inactive or expired?
 No Yes – When: ___ / ___ / _____ to ___ / ___ / _____
5. Applicant's Office Address: _____
(Street)

(City)
(State)
(Zip)
 - a. Please list the date of relocation to this address (if changing location): _____
6. Applicant's Home Address: _____
(Street)

(City)
(State)
(Zip)
7. Applicant's 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 to your address book.
8. Applicant's Social Security Number: _____ - _____ - _____
9. Applicant's Date of Birth: ___ / ___ / _____
10. Office Phone Number: (____) _____ - _____
11. Phone Number where the Broker can be contacted directly: (____) _____ - _____
12. Does the exterior sign list the name under which the entity is doing business? No Yes
13. Does the office have a location where business can be conducted in a confidential manner?
 No Yes
14. Where is the office located? A commercial building A private dwelling
15. If located in a private dwelling, does the office have a separate entrance from the dwelling?
 No Yes
16. Does the office have an escrow account? No Yes

APPLICANT BACKGROUND INFORMATION:

- 17. 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
- 18. If you answered yes to the above question, please provide the profession _____ and state or jurisdiction _____. Please do not abbreviate.
- 19. Since your initial application or last renewal, whichever is later, 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
- 20. 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
- 21. Since your initial application or last renewal, whichever is later, 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
- 22. Since your initial application or last renewal, whichever is later, 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
- 23. 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.

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)