

**IOWA REAL ESTATE COMMISSION**

1920 SE Hulsizer, Ankeny, Iowa 50021-3941 Telephone (515)281-5910

www.state.ia.us/irec

**BUSINESS APPLICATION**

<u>FEES</u>	<u>TYPE OF PAYMENT</u>
<input type="checkbox"/> \$170. Corporation <input type="checkbox"/> \$170. Partnership <input type="checkbox"/> \$50. Firm Branch <input type="checkbox"/> \$50. Broker Branch <input type="checkbox"/> \$50 Tradename <input type="checkbox"/> \$50 Add. Broker officer	<input type="checkbox"/> Check or money order enclosed payable to: Iowa Real Estate Commission <input type="checkbox"/> Please charge my ___ MasterCard or ___ Visa (These are the only credit cards accepted)  Credit Card Number _____ Exp. Date MM/YY _____  _____ Name on card ( <i>please print</i> ) <span style="float:right">Signature</span>

The information you provide will be open for public inspection under Iowa Code Section 22.11.

This application form is for use by a partnership, corporation, LLC or tradename and must be prepared by a broker partner, broker officer of the corporation or sole proprietor. In compliance with the provisions of Chapter 543B, Code of Iowa, I/we hereby make application for a license authorizing this firm or tradename to engage in the business of Real Estate Broker, and in support of the application make the following statements:

**ALL CORPORATIONS/PARTNERSHIPS MUST HAVE ERRORS & OMISSIONS INSURANCE**

1. FIRM NAME \_\_\_\_\_

2. TRADE NAME \_\_\_\_\_

3. BUSINESS ADDRESS \_\_\_\_\_  
(STREET) (NAME AND LICENSE NUMBER OF BROKER-IN-CHARGE)

\_\_\_\_\_  
(CITY) (STATE) (ZIP CODE) (TELEPHONE)

4. BRANCH OFFICE ADDRESS **SEE REVERSE SIDE OF APPLICATION TO APPLY FOR BRANCH OFFICE**

5. List name of all licensed officers and their titles: (*N/A for Tradename*)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. **RETURN ALL LICENSES WITH THIS APPLICATION, if applicable.** They MUST be assigned to the firm license.  
 (*N/A for Trade Name*)

OFFICE USE ONLY	DATE ISSUED	LICENSE NUMBER
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**SEE REVERSE**

7. IF A TRUST ACCOUNT IS REQUIRED PURSUANT TO IOWA CODE 543B.46, A CONSENT TO EXAMINE FORM MUST BE COMPLETED (SIGNED BY THE BANK) AND ATTACHED TO THIS FORM. IF A TRUST ACCOUNT IS NOT NEEDED AT THIS TIME, A TRUST ACCOUNT AFFIDAVIT MAY BE SIGNED AND ATTACHED TO THIS FORM.

8. BRANCH OFFICE ADDRESS #1 \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP CODE)

\_\_\_\_\_  
(TELEPHONE) (NAME AND LICENSE NUMBER OF BROKER-IN-CHARGE)

8. BRANCH OFFICE ADDRESS #2 \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP CODE)

\_\_\_\_\_  
(TELEPHONE) (NAME AND LICENSE NUMBER OF BROKER-IN-CHARGE)

9. This application is for the purpose of procuring an Iowa Real Estate License and it is certified that there has not been any violations of the provisions of Chapter 543B, Code of Iowa, of the license law of any state.

**The undersigned hereby promises and agrees in good faith to fully comply with the laws of Iowa, and the rules of the Real Estate Commission.**

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ )

**APPLICANT MUST SIGN AND  
ACKNOWLEDGE THIS AFFIDAVIT**

**I HEREBY CERTIFY** that I have not violated the provisions of the license laws of any state other than violations revealed in this application. I **FURTHER CERTIFY** that I have reviewed and am familiar with and will be bound by the Iowa license law and rules of the Commission, and that I personally completed this application and that the answers appearing hereon are true and correct to the best of my knowledge and belief.

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**NONRESIDENT'S CONSENT**

I **HEREBY APPOINT** the Chairperson of the Iowa Real Estate Commission of the State of Iowa as our agent in the State of Iowa upon whom process or pleadings may be served for and on our behalf as registered agent within the meaning of Chapter 543B.23, Code of Iowa. Such appointment shall be deemed to be and is irrevocable.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_