

THIS APPLICATION IS VALID FOR 30 DAYS FROM THE DATE IT IS SWORN

A. INDUSTRY AND CLASS OF LICENCE *Must be completed

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Real estate | <input type="checkbox"/> Associate |
| <input type="checkbox"/> Mortgage | <input type="checkbox"/> Associate broker |

B. INDIVIDUAL INFORMATION *All fields marked with an asterisk must be completed

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	* 1. Last name	* 2. Legal first name	
* 3. Legal middle name(s) (initials not acceptable)		* 4. All previous legal names & other names by which you are/have been known (including maiden and married names)	
* 5. Residential address (PO Box not acceptable)		* 6. City	* 7. Prov/State
9. Mailing address (if different from residential address)		10. City	11. Prov/State
* 13. Birth date (mm/dd/yy)		* 14. Primary phone number	15. Alternate phone number
* 16. Primary e-mail address			
* 8. Postal/Zip code		* 12. Postal/Zip code	

C. INFORMATION RESPECTING SUITABILITY *Must be completed

These questions apply to any and all situations and/or events preceding the date of this application. Please read each of the following questions carefully and answer truthfully:

- | | |
|---|--|
| 17. Have you or has any business you owned or participated in as a director or officer ever been refused a registration, denied authorization in any capacity, withdrawn from an industry and received a lifetime ban, or had any registration, licence, or authorization suspended or revoked by any association, professional or occupational body, any securities commission or any regulatory body of any kind in any jurisdiction other than RECA? | <input type="checkbox"/> yes <input type="checkbox"/> no |
| 18. Have you ever been disciplined by any real estate board, real estate association, mortgage broker association, or appraiser association, or any professional or occupational body, or any regulatory body of any kind in any jurisdiction other than RECA? | <input type="checkbox"/> yes <input type="checkbox"/> no |
| 19. Are you currently the subject of a suspension, investigation, licensing conditions, statement of claim relating to the business of an industry member or similar process including, but not limited to, conduct, audit, practice review or competence-related proceedings in any jurisdiction other than RECA? | <input type="checkbox"/> yes <input type="checkbox"/> no |
| 20. Have you or has any business you owned or participated in as a director or officer ever had any judgments rendered against you or the business? | <input type="checkbox"/> yes <input type="checkbox"/> no |
| 21. Have you or has any business you owned or participated in as a director or officer ever been in bankruptcy or ever been the subject of any bankruptcy or receivership proceedings? | <input type="checkbox"/> yes <input type="checkbox"/> no |
| 22. Have you ever been found guilty or convicted of any criminal offence or any other offence under any law of any country, province or state, excluding provincial or municipal highway traffic offences? | <input type="checkbox"/> yes <input type="checkbox"/> no |
| 23. Have any proceedings pursuant to the Criminal Code of Canada ever been commenced against you? | <input type="checkbox"/> yes <input type="checkbox"/> no |

If you answer YES to any of the above questions this original application and an original sworn statement in your own words regarding the event(s) must be forwarded to RECA. Copies of all relevant documentation must also be forwarded to RECA unless previously provided. The executive director may require further information be submitted within a specified time and may require verification by affidavit or otherwise of any information submitted then or previously.

D. INFORMATION RESPECTING ELIGIBILITY *Must be completed

Select one only:

- I have successfully completed the Alberta pre-licensing course and exam (proceed to Section F).
- I have requested and received a written exemption from the Real Estate Council of Alberta (attach a copy and proceed to F).
- I am currently licensed or eligible for relicensing in another jurisdiction and am applying for licence reciprocity (complete Section E).

E. CURRENT/PREVIOUS LICENSING HISTORY *TO BE COMPLETED ONLY BY THOSE INDIVIDUALS APPLYING FOR LICENCE RECIPROCITY

List all current and previous jurisdictions in which you are/were licensed, when you were licensed in each jurisdiction and the class(es) of licence you hold/have held.

Jurisdiction (province/state)	Date Licensed (from/to)	Class of licence

I hereby confirm that I have reviewed and familiarized myself with the applicable *Real Estate Reciprocity Information Materials* or the applicable *Mortgage Brokerage Reciprocity Information Materials*.

Initial here

NOTE: RECA will not consider an application for licence and registration prior to confirmation of an applicant's eligibility for licence reciprocity. Further information on the licence reciprocity process can be found at www.reca.ca.

F. AUTHORIZATION & ACKNOWLEDGEMENT

I authorize the Real Estate Council of Alberta to verify any information pursuant to this application from any source. I acknowledge that I am responsible for any costs incurred for such verification.

In making this application to the Real Estate Council of Alberta, I hereby consent to the Real Estate Council of Alberta's collection, use, and disclosure of my personal information for licensing and other regulatory purposes under the *Real Estate Act* and in accordance with the *Personal Information Protection Act*.

G. SUBSCRIPTION STATEMENT – ERRORS & OMISSIONS INSURANCE *Real estate only

I acknowledge an application for a licence and registration certificate as a real estate associate/associate broker will require that I subscribe to the Real Estate Insurance Exchange (REIX) and become a party to the REIX Subscription Agreement. I acknowledge that I am aware there are rights and obligations created by this Subscription Agreement, and I agree to be bound by the terms of the Agreement and the Insurance Policy issued by REIX. I appoint my attorney and grant the attorney powers as set out in Appendix A to the REIX Subscription Agreement.

H. RESPONSIBILITIES

I understand and accept the duties and responsibilities of an associate/associate broker as set out in the *Real Estate Act* and *Real Estate Act Rules*. I am aware I must comply with the *Real Estate Act*, *Real Estate Act Rules*, and laws that apply to an industry member authorized to trade in real estate or deal in mortgages in Alberta.

I hereby acknowledge my obligation to familiarize myself with the laws of Alberta as they apply to the business of an industry member, only engage in work or provide services in which I am authorized and competent to do so, and abide by any restrictions or conditions that may be imposed upon the issuance of a licence, including restrictions related to specific areas of practice or educational requirements addressing practice issues unique to Alberta.

I will immediately notify the executive director in writing of any changes in the information provided to the executive director in support of this licence and registration application that occur during the application process or after the licence and registration are issued.

I. AFFIDAVIT *Must be completed prior to Section J. Broker Acknowledgement

Making a false statement on this affidavit may constitute a criminal offence punishable by law, result in the refusal, suspension or cancellation of an authorization and/or be considered conduct deserving of sanction pursuant to the *Real Estate Act* or Rules.

CANADA
PROVINCE OF _____
TO WIT:

AFFIDAVIT
In the Matter of the *Real Estate Act*

I, _____ of the City of _____ in the Province of _____.
(Legal Name)

DO SOLEMNLY SWEAR I have read and understand all questions and statements contained in this application. All responses and information provided by me to RECA in this application are true and accurate.

SWORN BEFORE ME AT THE _____ **OF**
_____ **IN THE PROVINCE OF** _____,

THIS _____ DAY OF _____ A.D., _____
(year) Associate/ Associate Broker signature

Commissioner for Oaths/Notary Public/Solicitor Signature

Print name: _____

My appointment expires _____
(print or stamp here)

J. BROKER ACKNOWLEDGEMENT *Must be completed by the broker AFTER the application has been sworn by affidavit

I hereby confirm that I have reviewed and discussed with the applicant his/her responses to the questions numbered 17 to 23 contained in Section C of this application. Further, I have discussed with the applicant the consequences of providing false or misleading responses and that making a false statement by way of affidavit constitutes a criminal offence and may be considered conduct deserving of sanction by the Real Estate Council of Alberta and that any affidavit containing false or misleading information may result in the refusal of the application and suspension or cancellation of any authorization issued by the Real Estate Council of Alberta.

Initial here

I hereby acknowledge that I have reviewed the applicant's photo identification and can confirm that the individual applying for licence and registration is the same person named within the photo identification I reviewed.

Initial here

I hereby acknowledge that I have reviewed the applicant's birth certificate OR citizenship card and can confirm that the individual's name on this application is identical to the identification I reviewed.

Initial here

An associate/associate broker licence and registration certificate issued by the Council under the Rules constitutes authorization required under the *Real Estate Act* in order for an associate/associate broker to trade in real estate or deal in mortgages on behalf of a brokerage. I hereby confirm upon receipt of confirmation of authorization the individual named above will be employed or associated with the brokerage indicated below.

* Brokerage name

* Broker/broker delegate name (please print)

* Brokerage phone number

* Broker/broker delegate signature

* Date

K. FEES AND PAYMENT

Please indicate method of payment:

- Brokerage has made payment through RECA Online
- VISA
- MasterCard

Cheque
Cheque Number _____

Amount (*Fees for all classes of licences are available at www.reca.ca*)

Credit card number

Credit card expiry date

Name on card

Authorized signature