

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

A. INDUSTRY AND CLASS OF LICENCE *Must be completed

Real estate broker

Mortgage broker

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

Mr.
 Mrs.
 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

* 8. Postal/Zip code

9. Mailing address (if different from residential address)

10. City

11. Prov/State

12. Postal/Zip code

* 13. Birth date (mm/dd/yy)

* 14. Primary phone number

15. Alternate phone number

* 16. Primary e-mail address

C. INFORMATION RESPECTING SUITABILITY *Must be completed

If you are making an application for renewal of your registration certificate these questions apply only to any and all situations and/or events that have taken place SINCE THE DATE OF YOUR LAST 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owned or participated in as a director or officer been refused a registration, denied authorization in any capacity, withdrawn from an industry and received a lifetime ban, or had any registration, licence, or authorization suspended or revoked by any association, professional or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? yes no

18. Have you 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? yes no

19. Have you had any judgments rendered against you in relation to the provision of services or sale of goods to consumers? yes no

20. Has any business you owned or participated in as a director or officer in the past three years had any judgments rendered against the business? yes no

21. Have you or has any business you owned or participated in as a director or officer been in bankruptcy or been the subject of any bankruptcy or receivership proceedings? yes no

22. Have you 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? yes no

23. Have any proceedings pursuant to the Criminal Code of Canada been commenced against you? yes 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. 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*.

E. SUBSCRIPTION STATEMENT – ERRORS & OMISSIONS INSURANCE *Real estate industry members only

I acknowledge an application for a licence and registration certificate as a real estate 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.

F. RESPONSIBILITIES

I understand and accept the duties and responsibilities of a 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 registration application that occur during the application process or after the licence and registration are issued.

G. AFFIDAVIT (must be completed prior to Section H. Brokerage Acknowledgement, if required)

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)

Broker signature

Commissioner for Oaths/Notary Public/Solicitor Signature
Print name: _____

My appointment expires _____
(print or stamp here)

H. BROKERAGE ACKNOWLEDGEMENT **Complete only if the broker has less than 51% controlling interest (share ownership) in the brokerage legal entity*

Name of partner; director or officer; sole proprietor (other than the broker) - <i>please print</i>	Contact information for partner; director or officer; sole proprietor (other than the broker) - <i>phone number/email address</i>
Signature of partner; director or officer; sole proprietor	Date

I. FEES AND PAYMENT

Please indicate method of payment:

<input type="checkbox"/> Brokerage has made payment through RECA Online <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard	<input type="checkbox"/> Cheque Cheque Number _____	Amount (<i>Fees for all classes of licences are available at www.reca.ca</i>)
Credit card number	Credit card expiry date	
Name on card	Authorized signature	