



State of Rhode Island and Providence Plantations
DEPARTMENT OF BUSINESS REGULATION
1511 Pontiac Avenue, Bldg. 69-1
Cranston, Rhode Island 02920

Division of Commercial Licensing
Real Estate Section

REQUIREMENTS/APPLICATION FOR REAL ESTATE BROKERS

The following Requirements apply to Rhode Island Residents and Non-residents.

Candidates of legal age (18 years of age) applying for a Real Estate Broker's license must first contact **Pearson VUE** at (800) 274-8922 or by visiting their website at www.pearsonvue.com, to schedule an examination. The examination must be taken **before** submitting an application to the Rhode Island Department of Business Regulation, Division of Commercial Licensing, Real Estate Section.

Minimum requirements needed for consideration:

- **Two-years of full time experience as a Salesperson**, validated by an affirmation letter from the employing broker, **AND**;
- **Completion of ninety (90) hours of approved classroom study** in a school as defined in § 5-20.5-19, or from a school or organization licensed by the Department. A list of approved establishments can be found on the Department's website; (this educational requirement is in addition to the 45 hour sales pre-licensing classroom hours)

Upon successfully passing the examination, candidates must submit the following:

- The Original Test Score Report from Pearson VUE, both pages;
- A completed Real Estate Broker Application.
- A Criminal History Record (CHR) from the Rhode Island Department of the Attorney General's office. **Non-Residents** must submit a CHR from their home state law enforcement agency, as well as one from the Rhode Island Department of the Attorney General;
- **Non-Residents** must file an irrevocable Power of Attorney Form for service of process.
- Evidence of successful completion of a three-hour course in Lead Poisoning/Lead Hazard Mitigation (See Real Estate Pre-Licensing and Continuing Education Course List at http://www.dbr.ri.gov/documents/divisions/commlicensing/realestate/RE-CE_Course_List.pdf;
- Evidence of successful completion of three hours of New Agency Law, unless included in curriculum of either 45 or 90 hours of pre-licensing education;
- A Certificate of Errors and Omissions Insurance; and
- A Tax Payer Status Affidavit / Identity Verification.

Please submit TWO CHECKS with your application, as follows:

- **For licenses issued on or after May 1 of odd-numbered years:**
 - \$95.00, payable to the "Rhode Island General Treasurer," **AND**,
 - \$25.00, payable to the "Real Estate Recovery Account."
- **For licenses issued on or after May 1 of even-numbered years:**
 - \$180.00, payable to the "Rhode Island General Treasurer," **AND**,
 - \$25.00, payable to the "Real Estate Recovery Account."



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CRIMINAL HISTORY RECORD SUBMISSION REQUIREMENTS

FOR BROKER AND SALESPERSON APPLICANTS

A Criminal History Record (“CHR”) must be submitted to the Real Estate Section of the Department of Business Regulation (“DBR”), Division of Commercial Licensing with each Real Estate Application. Processing applications is contingent upon the complete disposition, or results of any charges delineated or resolved prior to application submission. See instructions below to learn how to obtain your CHR.

INSTRUCTIONS

Applying in Person: A Criminal History Record may be obtained by visiting the Bureau of Criminal Identification at the Rhode Island Department of Attorney General (“DAG”). To apply for a CHR in this manner, bring a picture-identification, showing your date of birth.

Applying by Mail: To apply by mail, send a notarized copy of a photo ID, showing your date of birth, and a signed/notarized letter, giving permission to the DAG to conduct a background investigation, along with a self-addressed stamped envelope.

The cost for a CHR, whether applying in person or by mail, is five dollars (\$5.00), and is payable by check or money order to the “BCI”. Please allow time for the DAG to process and generate your request. For further questions about this process, you may contact the DAG at the phone number below.

If you reside in another state, supply a CHR from your home state, as well as one from Rhode Island.

Contact Information for the Department of Attorney General:

- 150 South Main Street, Providence, Rhode Island, 02903.
- Telephone Number: (401) 274-4400
- Hours of operation are 8:30 a.m. to 4:30 p.m.



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<p><i>FOR OFFICE USE ONLY</i> LICENSE NUMBER</p>
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REAL ESTATE BROKER APPLICATION

Please print or type. All incomplete applications will be returned. Please allow 7-10 days for processing.

1. Name of Applicant:	2. Date of Birth	3. Age	4. Legal resident Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Residential Address:	City / Town	State	Zip Code
6. Telephone Number:	7. Email Address:	8. Social Security Number:	
9. Present Occupation:			
10. Occupations engaged in during the past five years:			
11. Have you been licensed as a Real Estate Salesperson full time for the previous two years? Yes <input type="checkbox"/> No <input type="checkbox"/> If you answered "Yes", please attach an affirmation letter from your Real Estate Broker.			
12. Real Estate Agency Name & Address:	Street / City / Town:	State:	Zip Code:
Telephone Number:			
13. Will you be the Principal Broker of the Agency listed above?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
14. Principal Broker's Name and Rhode Island License Number:			
15. Have you ever been refused a Real Estate Broker or Salesperson license in this state or any other state? Yes <input type="checkbox"/> No <input type="checkbox"/>			
16. Have you ever had a Real Estate Broker or Salesperson license suspended or revoked in this state or any other state? Yes <input type="checkbox"/> No <input type="checkbox"/>			
17. Have you ever been convicted of, or plead guilty or nolo contendere to forgery, embezzlement, obtaining money under false pretenses, bribery, larceny, extortion, conspiracy to defraud, or any other offenses of any type which would reasonably cause the Department to question your honesty, trustworthiness, integrity, good reputation or competency? Yes <input type="checkbox"/> No <input type="checkbox"/>			

**IF YOU ANSWERED "YES" TO QUESTIONS 15 - 17,
ATTACH A FULL EXPLANATION.**

18. R.I.G.L requires recommendations of three (3) Rhode Island residents who have known the applicant for at least three (3) years and are not related to the applicant and will attest that the applicant bears a good reputation for honesty and trustworthiness, and will recommend that a Real Estate Broker's license be granted to the applicant.

Name: _____ <i>(Print)</i>	Address: _____ _____
Name: _____ <i>(Print)</i>	Address: _____ _____
Name: _____ <i>(Print)</i>	Address: _____ _____

STATEMENT OF APPLICANT

I, the undersigned, swear under penalty of perjury, that the information provided in connection with this application is true to the best of my knowledge, with the understanding that any omissions, inaccuracies or failure to make full disclosures may be deemed sufficient reason to deny licensure as a Real Estate Broker by the Rhode Island Department of Business Regulation.

Signature _____ Date _____



Tax Payer Status Affidavit / Identity Verification

All persons applying or renewing any license, registration, permit or other authority (hereinafter called "licensee") to conduct a business or occupation in the state of Rhode Island are required to file all applicable tax returns and pay all taxes owed to the state prior to receiving a license as mandated by state law (RIGL 5-76) except as noted below.

In order to verify that the state is not owed taxes, licensees are required to provide their Social Security Number and Federal Tax Identification Number as appropriate. These numbers will be transmitted to the Division of Taxation to verify tax status prior to the issuance of a license. This declaration must be made prior to the issuance of a license.

Licensee Declaration

- I hereby declare, under penalty of perjury, that I have filed all required state tax returns and have paid all taxes owed.
- I have entered a written installment agreement to pay delinquent taxes that is satisfactory to the Tax Administrator.
- I am currently pursuing administrative review of taxes owed to the state.
- I am in federal bankruptcy. (Case # _____)
- I am in state receivership. (Case # _____)
- I have been discharged from Bankruptcy. (Case # _____)

Full Name (Please Print or Type)

Social Security Number (or FEIN for Business)

Signature

Date



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POWER OF ATTORNEY

I, _____, having applied to be licensed as a non-resident real estate broker in the State of Rhode Island, do hereby irrevocably appoint the Director of the Department of Business Regulation, his successor or successors, as my lawful attorney, upon whom all lawful process in any action or legal proceeding against me may be served in like manner and with the same legal force and effect as if I had been lawfully served with said process. As such, I do hereby authorize said attorney to receive and accept service of process, pursuant to the provisions of Title 5, Chapter 20.5-10(d), of the General Laws of Rhode Island, as amended.

Signature: _____ Date: _____

Subscribed and sworn to before the undersigned authority in the State of _____,
in the County of _____, on this _____, day of _____,
20_____.

Notary Public

My Commission Expires: _____.