

**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) <i>(initials not acceptable)</i>		4. All previous legal names & other names by which you are/have been known <i>(including maiden and married names)</i>	
* 5. Residential address <i>(PO Box not acceptable)</i>	* 6. City	* 7. Prov/State	* 8. Postal/Zip code
9. Mailing address <i>(if different from residential address)</i>	10. City	11. Prov/State	12. Postal/Zip code
* 13. Birth date <i>(mm/dd/yy)</i>	* 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participated in as a director, officer, or manager been refused a registration, denied authorization in any capacity, withdrawn from an industry and received a lifetime ban, or had any registration, licence, or authorization suspended or revoked by any association, professional or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? | <input type="checkbox"/> yes | <input type="checkbox"/> 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?  | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| 19. Have you or has any business you owned or participated in as a director, officer, or manager had any judgments rendered against you or the business in relation to: a trade in real estate; dealings in mortgages; acting as an appraiser; fraud; breach of trust; misappropriation or theft?  | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| 20. Have you or has any business you owned or participated in as a director, officer, or manager been in bankruptcy or been the subject of any bankruptcy or receivership proceedings?   | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| 21. 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 offences for which a pardon has been granted or provincial or municipal highway traffic offences?  | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| 22. Have any proceedings pursuant to the Criminal Code of Canada been commenced against you?   | <input type="checkbox"/> yes | <input type="checkbox"/> no |

**If you answer YES to any of the above questions provide copies of all relevant documentation along with this original application to RECA. 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** *(applies to real estate industry members 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.

**F. RESPONSIBILITIES**

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

**G. AFFIDAVIT** *(must be completed)*

All questions must be answered truthfully and completely. Making a false statement on this affidavit constitutes a criminal offence and is punishable by law and may be considered conduct deserving of sanction by the Real Estate Council of Alberta. Any affidavit containing false or misleading information may result in the refusal of the application and suspension or cancellation of any authorization issued thereupon.

CANADA  
PROVINCE OF ALBERTA  
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. All information on this application is true.

**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

My appointment expires \_\_\_\_\_  
(print or stamp here)

**H. BROKER ACKNOWLEDGEMENT** (to 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 their responses to the questions numbered 17 to 22 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

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. Additionally, I hereby acknowledge that I have reviewed the applicant's photo identification and can confirm that the applicant's name on this application is identical to the photo identification I reviewed.

\* Brokerage name

\* Broker/broker delegate name (please print)

\* Brokerage phone number

\* Broker/broker delegate signature

\* Date

**I. 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](http://www.reca.ca))

Credit card number

Credit card expiry date

Name on card

Authorized signature