

**REFERRAL AGENT APPLICATION FOR  
 REINSTATEMENT/TRANSFER, NAME CHANGE OR CHANGE OF LICENSE TYPE**

DATE PROCESSED		
mm	dd	yy

EFFECTIVE DATE		
mm	dd	yy

PROCESSOR INITIALS
(First, MI, Last)

- DO NOT WRITE ABOVE THIS LINE - FOR REAL ESTATE LICENSING SERVICES USE ONLY -

<input type="checkbox"/> <b>REINSTATEMENT OF UNRENEWED REFERRAL AGENT LICENSE</b> (See Instruction #5 below)	<b>\$150.00</b>	<input type="checkbox"/> <b>CHANGE OF LICENSE TYPE SALESPERSON / BROKER OR BROKER-SALESPERSON TO REFERRAL AGENT</b>	<b>\$50.00</b>
<input type="checkbox"/> <b>CHANGE OF NAME</b>	<b>\$50.00</b>	<input type="checkbox"/> <b>TRANSFER</b> (within current license term)	<b>\$25.00</b>

**INSTRUCTIONS**

1. Application must be accompanied by either a Certified Check, Money Order, Broker Business Account Check, or Cashier's Check made payable to "STATE TREASURER OF NEW JERSEY". **NO PERSONAL CHECKS ACCEPTED (Does not apply to transactions processed through On-line Services)**.
2. Anyone submitting a dishonored check, in connection with an application fee for a Real Estate License, is subject to a New Jersey Real Estate Commission administrative penalty of \$500.00.
3. If application includes a change of name, attach a copy of the marriage certificate, divorce decree, or court order indicating legal name change and the "change of name" fee.
4. Disclosure of your Social Security Number is mandatory for child support enforcement purposes. The Real Estate Commission's authority to compel disclosure of the Social Security Number is established at P.L., 1966, c.7 and N.J.A.R. 11:5-3.5. Unless otherwise directed, the Commission will also use your Social Security Number for internal identification purposes. Place an "X" inside the block to the right if you object to the Commission doing so →
5. Applicants seeking to reinstate an unexpired license must present to their Employing Broker, or Broker of Record: a.) a birth certificate, b.) U.S. passport establishing U.S. citizenship or c.) an INS form I-551 (Green Card) establishing legal presence in the United States.

**TO BE COMPLETED BY APPLICANT:**

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Applicant's Previous License  
Reference Number

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Employing Broker, or Business Entity,  
License Reference Number

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Applicant's Social Security Number

PRINT APPLICANT'S FULL LEGAL NAME (Last, First, MI)

PERMANENT HOME STREET ADDRESS (Number and Name) – Line 1

P.O. BOX, APARTMENT, OR FLOOR NUMBER – Line 2

CITY

STATE

ZIP CODE + 4

COUNTY

DATE OF BIRTH (mm/dd/yy)

HOME TELEPHONE # including area code

**ALL QUESTIONS MUST BE ANSWERED**

- With the exception of motor vehicle violations, since your last New Jersey Real Estate license was last issued or renewed, have you been convicted of a crime, misdemeanor, disorderly persons offense in the State of New Jersey, any other State or by the Federal Government, or are you presently on probation or parole?  YES  NO
- Is there a criminal complaint, disorderly persons charge, a criminal accusation or criminal information presently pending against you or are you presently under indictment in New Jersey, or any other State or by the Federal Government, or are you presently enrolled in New Jersey's Pre-Trial (PT1) program or any similar State or Federal program involving the deferral of the disposition or sentencing in a criminal matter?  YES  NO
- Have you ever had a real estate or other professional license, certification or similar credential revoked, suspended surrendered in lieu of formal prosecution, or denied in New Jersey or any other State  YES  NO
- Do you have a child support obligation on which there is an arrearage due that equals, or exceeds, the amount of child support payable for six (6) months, or are you the subject of a child support related warrant, or during the past six (6) months, have you failed to provide any court-related health care coverage, or have you failed to respond to a subpoena relating to a paternity or child support proceeding?  YES  NO
- Are you currently licensed or were you previously licensed by the Real Estate Commission? If "YES", please give date of last licensure and the name of the previous employing broker/company.  YES  NO

mm	dd	yy

EMPLOYING BROKER / COMPANY

- Do you currently hold a Real Estate License issued by another State? If "YES", please indicate the State(s) below  YES  NO

STATE INITIALS (e.g.- NJ = New Jersey)

If the answer to questions 1 through 4 above is "YES", submit attachment giving particulars, including a copy of any indictment, judgment of conviction or order or revocation and/or suspension. If particulars and copies previously supplied, or if applicant was reinstated by order of the New Jersey Real Estate Commission, place an "X" in the box to the right →

**UNDER PENALTY OR PERJURY,**

I hereby certify that: the information on all sides of this application is true and correct; the New Jersey Real Estate Commission may rely on its truthfulness in considering this application; I am a citizen of the U.S., or legally present in the U.S.; and a written employment agreement, as required by N.J.A.C. 11:5-4.1, has been completed and that I have a copy of the signed agreement in my possession. **[Making a false statement regarding child support, paternity or court ordered health care coverage matter may subject you to contempt of court.]** If this application is for other than a change of name, I further certify that I have reviewed with my broker or his/her designee the [restrictions imposed by N.J.S.A. 45:15-3 upon my activity as a referral agent](#), which I understand is limited to referring prospects for brokerage services to my broker or his/her designee.

PRINT Applicant's Full Legal Name (First, MI, Last)

mm	dd	yy

SIGN Applicant's Full Legal Name (First, MI, Last)

**TO BE COMPLETED BY EMPLOYING BROKER / BROKER OF RECORD:**

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LICENSE REFERENCE NUMBER of Corporation, Partnership, LLC or Employing Broker

NAME of Corporation, Partnership, LLC or Employing Broker

ALTERNATE NAME OR DBA (Doing Business As) NAME - If applicable

BUSINESS ADDRESS (Number and Name) – Line 1

BUSINESS ADDRESS (P.O. BOX, APARTMENT, OR FLOOR NUMBER) – Line 2

CITY

STATE

ZIP CODE +4 (if applicable)

COUNTY

BUSINESS PHONE # (with area code)

E-MAIL ADDRESS (Employing Broker of Record)

**UNDER PENALTY OR PERJURY,**

I hereby certify that: the applicant is authorized to apply for a license under my supervision, I am not aware of any information which reflects adversely upon his/her good moral character. **(If broker is aware of such information, please attach a separate letter providing details.)**

I further certify that: the information provided on this application is true and correct, the New Jersey Real Estate Commission may rely on its truthfulness in considering this application, a written employment agreement, as required by N.J.A.C. 11:5-4.1, has been completed and that I have a copy of the signed agreement in my possession; and that in the case of an application to reinstate an unexpired license, the applicant has presented a Birth Certificate, or U.S. Passport, establishing his/her U.S. Citizenship or an INS form I-551 (Green Card) establishing their legal presence in the U.S.. **If this application is for other than a change of name, I further certify that I or a member of my staff have reviewed with the applicant the restrictions imposed by N.J.S.A. 45:15:3 upon his/her brokerage activities and that he/she has acknowledged that such activity is limited to referring prospects to me or my designee.**

I further certify that I am aware that this applicant is **PROHIBITED BY LAW** from engaging in any brokerage activity, unless and until he/she is authorized to do so by the New Jersey Real Estate Commission.

\_\_\_\_\_  
**PRINT FULL LEGAL NAME (First, MI, Last) OF EMPLOYING BROKER, BROKER OF RECORD OR  
HOLDER OF POWER OF ATTORNEY FILED WITH THE NEW JERSEY REAL ESTATE COMMISSION**

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_  
mm dd yy

\_\_\_\_\_  
**SIGN FULL LEGAL NAME (First, MI, Last) OF EMPLOYING BROKER, BROKER OF RECORD OR  
HOLDER OF POWER OF ATTORNEY FILED WITH THE NEW JERSEY REAL ESTATE COMMISSION**

**TO BE COMPLETED BY NON-RESIDENT APPLICANTS ONLY**

**INDIVIDUAL  
IRREVOCABLE CONSENT TO SERVICE OF PROCESS**

I, \_\_\_\_\_  
APPLICANT'S FULL LEGAL NAME (First MI Last)

having my principal place of residence at:

\_\_\_\_\_  
HOME ADDRESS (Number and Name) – Line 1

\_\_\_\_\_  
HOME ADDRESS (P.O. BOX, APARTMENT, OR FLOOR NUMBER) – Line 2

\_\_\_\_\_  
CITY STATE ZIP CODE +4

hereby give my irrevocable consent that service of process in any action or proceeding arising out of my activities as New Jersey Real Estate Licensee may be made upon me by service in-person or by certified mail upon the Executive Director of the Real Estate Commission or the person in-charge at the Office of the Commission, pursuant to N.J.S.A. 45:15-9. I agree that such service shall have the same valid binding effect upon me individually in all courts as if service has been made upon me in-person within the State of New Jersey.

\_\_\_\_\_  
SIGNATURE OF APPLICANT (First, MI, Last)

**DATE**

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_  
mm dd yy

\_\_\_\_\_  
**PRINT** Witnesses Full Legal Name (First, MI, Last)

State of \_\_\_\_\_

County of \_\_\_\_\_ SS

**I CERTIFY** that on \_\_\_\_\_, 20\_\_\_\_\_  
(mm/dd) yy **PRINT** Applicant's Full Name (First, MI, Last)

personally came before me and acknowledged under oath, to my satisfaction, that this person:

- a.) Is named in and personally signed this Consent to Service of Process; and
- b.) Signed, sealed and delivered this Consent to Service of Process as his/her act and deed

\_\_\_\_\_  
**SIGN** Witnesses Full Legal Name (First, MI, Last)

\_\_\_\_\_  
**PRINT** Witnesses Full Legal Name (First, MI, Last)

\_\_\_\_\_  
TITLE

If Notary, my commission expires on: \_\_\_\_|\_\_\_\_|\_\_\_\_\_  
mm dd yy

AFFIX  
OFFICIAL  
SEAL  
HERE