IOWA REAL ESTATE COMMISSION

200 E. Grand, Suite 350 ● Des Moines, IA 50309
Telephone: (515) 725-9022
www.plb.iowa.gov
realestatecommission@iowa.gov

Application for a Firm License

INSTRUCTIONS

- 1. Firm licensure required for: partnerships, associations, corporations, professional corporations and professional limited liability companies pursuant to Iowa Code § 543B.2.
- 2. Complete the entire application. Incomplete applications will be returned unprocessed.
- 3. The firm license fee is \$170.00. Attach check, money order or provide the required credit card information. A license will be issued for three calendar years from the date the application is processed, counting the remaining portion of the year issued as one full year.
 - a. If you wish to advertise using a name other than the firm name you must also apply for a tradename license as required by 193E Iowa Administrative Code § 10.1. (Tradename fee is \$50.00)
- 4. Attach proof of current errors and omissions insurance coverage in Iowa.

If the coverage is firm umbrella type coverage, the proof of coverage provided must also show that all activities contemplated under lowa Code chapter 543B are covered. The designated broker must provide a list of licensees assigned to the firm that are covered under the firm's insurance policy.

Errors and omissions insurance coverage must comply with all the requirements in 193E Iowa Administrative Code chapter 19.

- 5. Attach a copy of a legal document naming all officers, members and/or partners of the firm. At least one of the officers, members or partners must be an lowa licensed broker assigned to this firm as required by lowa Code § 543B.2. Applications for a new broker, if applicable, must be sent in with the firm application.
- 6. A broker officer, member or partner of a firm located outside of lowa must complete the "Nonresident Consent" section of the application.
- 7. The data provided on the application is required by the Iowa Fair Information Practices Act. Information regarding the release of public records and the procedures for maintaining confidential records is available in 193 Administrative Code chapter 13 or upon request from the offices of the Iowa Real Estate Commission.
- 8. Falsification of this application will subject the applicant to the penalties of lowa Code § 543B.29(1). A license can be revoked or suspended based on a false statement or submission in procuring a license.

CHECKLIST

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All pages of the application, completed in its entirety.
Check for the correct fee or the correct credit card information
Notarized signature of broker
Proof of current E & O insurance in Iowa
The appropriate trust account form
Legal proof of officers, members or partners. (Example: copy of the Articles of Incorporation; Articles of
Organization, certified copy of Board minutes showing election of officer.)

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FIRM APPLICATION

The information you provide will be open for public inspection under Iowa Code Section 22.11.

In compliance with the provisions of Chapter 543B, Code of Iowa, I/we hereby make application for a license authorizing this firm to engage in the business of Real Estate Broker, and in support of the application make the following statements:

1.	FIRM NAME:				
2.	LICENSE #: (if reinstating	ng)	TAX ID #:		
3.	BUSINESS ADDRESS:	(STREET)			
	(CITY)	(STATE)	(ZIP CODE)		
	(TELEPHONE)	(FAX)	(E-MAIL)		
4.	NAME OF BROKER IN	CHARGE:			
5.	IOWA LICENSE NUME	BER OF BROKER IN CHA	RGE: B		
6.	List names and titles of a and attach legal proof of		ers, broker partners or broker members		

- 7. <u>RETURN ALL LICENSES WITH THIS APPLICTION, if applicable</u>. They MUST be assigned to the firm license.
- 8. IF A TRUST ACCOUNT IS REQUIRED PURSUANT TO IOWA CODE 543B.46, A CONSENT TO EXAMINE FORM MUST BE COMPLETED (SIGNED BY THE BANK) AND ATTACHED TO THIS FORM. IF A TRUST ACCOUNT IS NOT NEEDED AT THIS TIME, A TRUST ACCOUNT AFFIDAVIT MUST BE SIGNED AND ATTACHED TO THIS FORM.

9. This application is for the purpose of procuring an Iowa not been any violations of the provisions of Chapter 543B, C The undersigned hereby promises and agrees in good the rules of the Real Estate Commission.	ode of Iowa, of the license law of any state.
STATE OF) COUNTY OF)	APPLICANT MUST SIGN AND ACKNOWLEDGE THIS AFFIDAVIT
I HEREBY CERTIFY that I have not violated the provision violations revealed in this application. I FURTHER CERTIF will be bound by the Iowa license law and rules of the Commapplication and that the answers appearing hereon are true and	Y that I have reviewed and am familiar with and nission, and that I personally completed this
Subscribed and sworn before me this	day of
Applicant's Signature	Signature of Notary Public
Date	Date
NONRESIDENT'S	CONSENT
I HEREBY APPOINT the Chairperson of the Iowa Real Esta the State of Iowa upon whom process or pleadings may be within the meaning of Chapter 543B.23, Code of Iowa. irrevocable.	e served for and on our behalf as registered agent
APPLICANT'S SIGNATURE	DATE

<u>FEES</u>	TYPE OF PAYMENT		
□ \$170. Firm License □ \$170. Reinstate Expired Firm License* □ \$50. Additional Broker Officer License**	 □ Check or money order enclosed payable to: Iowa Real Estate Commission □ Please charge my □ MasterCard □ Visa □ Discover (These are the only credit cards accepted) □ Credit Card Number □ Exp. Date MM/YY □		
	Name on card (please print) Signature		

^{*}To reinstate an expired Corporation/LLC/Partnership license the Federal I.D. number must be the same as what it was before the license expired.

^{**} If the broker officer of this new firm is already licensed as a broker officer of another licensed firm.

Per 193E- 7.1(5) A licensed officer of a corporation or partnership may be licensed as an officer or partner of more than one corporation or partnership. The main or primary license for which the full license fee was paid must be maintained in active status to keep any additional licenses that were issued at a reduced fee active and in effect.

CONSENT TO EXAMINE AND AUDIT TRUST ACCOUNT

IOWA REAL ESTATE COMMISSION 200 E. GRAND, SUITE 350 DES MOINES, IOWA 50309

	(NAME OF SOLE PROPRIETOR, PART	NERSHIP OR CORE	PORATION FILING THIS FORM)	
having filed an application for a Chapter 543B.46, Code of lowa, applicant now maintains a real money, rentals, or other trust furbehalf of their principals or any account is carried with said deposits.	a real estate broker licens 1993, does register with estate trust account in ands received by said brok y other persons pending	se or being a the lowa Rea which the braier, or the bro the consum	a holder of a broker lical Estate Commission a oker shall deposit all oker associate or sales mation or termination	as the depository in which down payments, earnest sperson of said broker, on
(NAME OF DEPOSIT	CODVIX			, lowa
(NAME OF DEPOSIT	ORT)			(CITT)
(EXACT NAME OF ACCOUNT A	T ACCORDING TO DEPOSITORY RECORD	RUST ACCOUN	T**	(ACCOUNT NUMBER
(EXCELLANTE OF VIOLOGIAL)	looding to ber out out neodic	0)		(AGGGAT NGMBER
(NAME OF SOLE DEODRIETOR DART	NERSHIP OR CORPORATION FILING TH	IIS EODM)	does hereby c	ovenant and agree to authorize
(NAME OF SOLE PROPRIETOR, PART	NERGHIF OR CORFORATION FIEING TI	iio i Okwij		
		t	o allow at any time any duly	authorized representative
(NAME	OF DEPOSITORY)			
of the Iowa Real Estate Commission to e	examine and audit the aforemen	tioned trust acco	ount.	
Executed at	,	this	day of	, 20
This account is:	(STATE			
☐ Interest bearing with interest☐ Interest bearing with interest☐ Non-interest bearing property	to buyer and/or seller or p		er by written agreemer	nt.
(SIGNATURE OF SOLE PRO	PRIETOR)		(SIGNATURE OF LIC	ENSED OFFICER OR PARTNER)
			(SIGNATURE OF LIC	ENSED OFFICER OR PARTNER)
			•	ENGLE OF TOLK ORT ARTIVLERY
	CERTIFICATION	NOF DEPOS	SITORY	
The undersigned, a duly authori: above applicant or licensee do depository will allow a duly auth aforementioned real estate trust	pes maintain a real esta norized representative of	te trust acco	ount as set forth abo	ve and agrees that said
Executed at (CITY)	,,,	this ΓΕ)	day of	, 20
(SEAL OF DEPOSIT	ORY)		(NAME C	DF DEPOSITORY)
			(SIGNATURE AND TITLE OF	DEPOSITORY OFFICER)

^{*}TRUST ACCOUNT MUST BE IN A BANK, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK OR CREDIT UNION LOCATED IN IOWA

^{**}TRUST ACCOUNT MUST BE PART OF THE TITLE OF THE ACCOUNT

TRUST ACCOUNT STATUS AFFIDAVIT

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Iowa Real Estate Commission Administrative Rule 193E--13.1(5) states as follows:

"13.1(5)(a) If a broker does not expect to receive trust funds, the broker shall file an affidavit with the Commission on a form prescribed by and available from the Commission."

Administrative Rule 193E--1.27(5) further states:

"13.1(5)(b) If trust funds are received by the broker after filing an affidavit, the broker must immediately open a trust account and file the appropriate Consent to Examine and Audit Trust Account Form with the Commission.."

I HEREBY CERTIFY that as an Active Broker I do not expect to receive trust funds in the course of my business; therefore, I do not wish to maintain an open trust account. I understand a Consent to Examine form will be filed with the Commission at such time as a trust account is opened.

Executed this	day of		20	
(City)	(State)	(Zip Code)		
(Current Business	s Address)			
(Print Name of Br	oker)			
(Broker License N	lumber)			
		()	,	
		(Signa	ature of Broker)	

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TRADENAME APPLICATION

(Use to license a fictitious name or a DBA to be used for advertising purposes)

The information you provide will be open for public inspection under Iowa Code Section 22.11.

1. FIRM/BROKER SOLE PROPRIETOR NAME ______

2. FIRM/BROKER SOLE PROPRIETOR LICENSE #					
. TRADENAME					
4. AUTHORIZING BROKER SIGNATURE					
NOTE: The expiration date of the tradename will be the same as the firm/sole proprietor's expiration date.					
\$50 New Tradename \$50 Reinstate Expired Tradename* *Tradename must be issued exactly the same as it was before the license expired.					
TYPE OF PAYMENT					
☐ Check or money order enclosed payable to: Iowa Real Estate Commission Please charge my ☐ MasterCard ☐ Visa ☐ Discover (These are the only credit cards accepted)					
Credit Card Number Exp. Date MM/YY					
Name on card (please print) Signature					