



ARKANSAS REAL ESTATE COMMISSION

Phone: (501) 683-8010 Fax: (501) 683-8020

**REREQUEST FOR
CERTIFICATE OF LICENSURE
(License History)**

INSTRUCTIONS:

- Complete and return this form with a \$10.00 fee.

Your request will be processed within 7-10 business days after receipt.

Date: _____

Licensee Name: _____

License Number: _____

Name of Requestor: _____

Reason for Request: _____

Address where the document(s) should be mailed/emailed:

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Signature of Requestor: _____

COMMISSION USE ONLY
Receipt # _____
Date Paid _____

Return to the Arkansas Real Estate Commission | 612 South Summit St | Little Rock, AR 72201