ARKANSAS REAL ESTATE COMMISSION
612 South Summit Street
Little Rock, AR 72201-47 40
Phone: (501)683-8010 Fax: (501)683-8020
www.arec.arkansas.gov

Dear Non-Resident Real Estate Applicant:

If you are applying for a Non-Resident Arkansas Real Estate License and reside in and are actively licensed in the following states, please see the information below:

Georgia	Iowa	Kansas	Louisiana
Mississippi	Nebraska	Pennsylvania	

Please see the appropriate fees to process your application below. All fees must be paid via a **cashier's check or signed money order** payable to "AREC."

Broker: $182.00

Application fee: $50
State criminal background: $22
FBI criminal background: $15.00
License Fee: $95

Salesperson: $162.00

Application fee: $50
State criminal background: $22
FBI criminal background: $15.00
License Fee: $75

Please submit the following list with your application and fee:

- Completed, notarized application.
- **Cashier's check or signed money order** in the amount shown above payable to AREC.
- An **Original License History** from your state of residence and any other state you are licensed or have been licensed.
- Copy of your ID or birth certificate
- Reciprocal Initial Issuance Form
- Non-Resident Acknowledgment and Certificate of Consent
- Background Check Acknowledgment Form
- Completed Fingerprint Card

NOTE: Applicants are not required to take the exam.

ARKANSAS REAL ESTATE COMMISSION (AREC)

612 South Summit Street, Little Rock, AR 72201-4740
phone: (501) 683-8010 **fax:** (501) 683-8020

APPLICATION FOR REAL ESTATE LICENSE EXAMINATION

Check one: ☐ Salesperson ☐ Broker

Instructions: This application must be completed, signed and notarized. Each question must be answered and the necessary documentation and fees attached or the application will be returned to the applicant.

1. NAME OF APPLICANT: *(as stated on driver's license)*

LAST NAME | FIRST | MIDDLE | MAIDEN

2. DATE OF BIRTH MO / DAY / YEAR **SEX** M/F **SOCIAL SECURITY NUMBER** - -

DRIVERS LICENSE NUMBER | **STATE OF ISSUE** | **RACE** | **STATE OF BIRTH**

3. MAILING ADDRESS: STREET ADDRESS *(If applicable, please include the following information - Apartment/Suite/Floor #)* PO BOX NUMBER

CITY | STATE | ZIP CODE+4

( ) DAYTIME PHONE NUMBER | ( ) CELL PHONE NUMBER | EMAIL ADDRESS

	YES	NO
4. After the initiation of an investigation, hearing, or other administrative action, have you had a professional, vocational or occupational license, permit, certification or registration denied, revoked, suspended, cancelled, surrendered, or subject to any sanctions, including probation? (If you responded Yes, provide a written report. The report should include the date of the action, name and address of the regulatory agency which has taken the action, and copies of the documents pertaining thereto. The report should also include your explanation of the circumstances which led to the action, along with any additional information you wish to submit.)	☐	☐
5. Have you ever been convicted of any crime other than a traffic violation? Being convicted shall include all instances in which a Plea of guilty or nolo contendere or finding of guilt is the basis for the conviction, and all proceedings in which the sentence has been deferred or suspended. (If you responded Yes, provide a written report of the conviction which should include the date of the offense and of the conviction, the name and address of the court, the specific crime of which convicted or to which a guilty plea or nolo contendere (no contest) was entered, the fine, penalty and/or other sanctions imposed, and copies of the charging document and judgement of conviction or other disposition including probation or suspension of sentence. All requested documents and reports must be included with the application.) **IF YOU DO NOT FULLY UNDERSTAND THIS QUESTION, CONSULT WITH AN ATTORNEY.**	☐	☐
6. Are there any pending lawsuits filed against you or have you ever had a judgement entered against you for fraud, deceit, dishonesty, misrepresentation, or conversion of property including money belonging to another in any civil proceedings? (If you responded Yes, provide a written report which should include a complete statement of the charges and facts, together with dates, name and location of the court in which the proceedings were held or are pending.)	☐	☐
7. Are there any judgements against you? (If you responded Yes, provide a written report which should include a copy of the unsatisfied judgement.)	☐	☐
8. Are you now licensed or have you ever been licensed in real estate in Arkansas or any other jurisdiction? (If you responded Yes, list all such jurisdictions and provide a certified License History from the official record of all those jurisdictions except Arkansas.)	☐	☐
9. Are you or your spouse an active duty military member or returning military veteran? (If you responded Yes, please provide a copy of your current military identification card. Additional documentation may be necessary.)	☐	☐

10. A.C.A.§ 17-1-104 requires agencies that issue professional licenses to record and forward applicant's Social Security Number to Child Support Enforcement.
For that reason, it is mandatory that an applicant for an Arkansas real estate license disclose his/her Social Security Number. Social Security Numbers will be transferred to the Arkansas Office of Child Support Enforcement for Child Support Purposes. Social Security Numbers shall not be disclosed publicly and are exempt from open records requirements of the Freedom of Information Act. Disclosure of Social Security Numbers without the consent of the individual is a Class B misdemeanor. Failure of an applicant to state his/her Social Security Number in an application for a real estate license will result in the denial of the license.

ATTACH PROOF OF THE FOLLOWING:

A. **Attainment of age of majority (18) (Copy of driver's license, copy of birth certificate, or other acceptable document)**

B. **Successful completion of education requirements**
(Original certificate(s), or certified copies, or other documentation satisfactory to the Commission)

C. **Successful completion of experience requirements for broker applicants**
(Completion of Broker Experience Form and certified license history if experience requirement was met in another jurisdiction)

D. **Background Check Acknowledgment (BCA) Form. (For completion of federal criminal record search). Non-Residents must also submit a completed fingerprint card.**

28 CFR § 16.34 – Procedure to obtain change, correction, or updating of identification records.

If, after viewing his/her identification record, the subject thereof believes that it is incorrect or incomplete in any respect and wish changes, corrections, or updating of the alleged deficiency, he/she should make application directly to the agency which contributed the questioned information. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Service (CJIS) Division, ATTN: SCU, Mod. D2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will then forward the challenge to the agency which submitted the data requesting that agency to verify or correct the challenged entry. Upon the receipt of an official communication directly from the agency which contributed the original information, the FBI CJIS Division will make any changes necessary in accordance with the information supplied by that agency.

By placing my signature below I certify that I have read each paragraph above and acknowledge each disclosure, that all information provided in this application is true and correct, and that the Arkansas Real Estate Commission may rely on its truthfulness in considering this application. I further give my consent for the Arkansas State Police and the Federal Bureau of Investigations to conduct a criminal record search and to release any results to: **Arkansas Real Estate Commission**, 612 South Summit Street, Little Rock, Arkansas 72201-4740

_____

SIGNATURE **DATE (MONTH/DAY/YEAR)**

NO REQUEST WILL BE PROCESSED WITHOUT A NOTARIZED SIGNATURE.

State of _____

County of _____

Subscribed and sworn before me, a Notary Public, in and for the

county and state aforesaid, this the _____ day of

NOTARY SEAL _____, 20_____.

_____

NOTARY PUBLIC SIGNATURE

ARKANSAS REAL ESTATE COMMISSION
Phone: (501) 683-8010 Fax: (501) 683-8020

NON-RESIDENT ACKNOWLEGEMENT AND CERTIFICATE OF CONSENT

In accordance with Arkansas Real Estate License Law, Section §17-42-305 (a)(3).

I, _____, agree that I have read the Arkansas Real Estate License Law and Regulations and will abide by its provisions in all real estate activity and agree to cooperate with any investigation initiated by the Commission by promptly providing any and all pertinent documentation the Commission may deem necessary. _____ **(Please initial to indicate that you have read and acknowledge above statement.)**

Arkansas Code Annotated, Section §17-42-305 (a)(6) provides that a nonresident shall:

> File with the executive director a designation in writing that appoints the executive director to act as the licensee's agent upon whom all judicial and other process or legal notices directed to such licensee may be served.
>
> And further provides;
>
> Service upon the executive director shall be equivalent to personal service upon the licensee.
>
> Copies of such appointment, certified by the executive director, shall be deemed sufficient evidence thereof and shall be admitted in evidence with the same force and effect as the originals thereof might be admitted.
>
> In such written designation, the licensee shall agree that any lawful process against the licensee, which is served upon the executive director, shall be of the same legal force and validity as if served upon the licensee and that the authority shall continue in force so long as any liability remains outstanding in this jurisdiction.

I consent to the provisions of the above section of the Arkansas Real Estate License Law as to service and agree that any lawful process against me which is served upon the executive director of the Arkansas Real Estate Commission shall be of the same legal force and validity as if served upon me, and that the authority shall continue in force as long as any liability remains outstanding in Arkansas.

Applicant Name:_____
(First Name) (Middle Name) (Last Name)

Applicant Signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____ 20 ____.

Notary Public: _____

(SEAL OF OFFICE)

My Commission Expires: _____

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

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Little Rock, AR 722014740
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RECIPROCAL INITIAL ISSUANCE FORM

Complete this form if you are applying for a Broker or Salesperson License and return it to the Arkansas Real Estate Commission (AREC) with the appropriate license forms and fees (cashier's check or signed money order). To be affiliated (active status) with a licensed Arkansas real estate broker, secure the signature of your sponsoring broker on this form.

Select the license title you are seeking:

- ○ Principal Broker
- ○ Executive Broker
- ○ Associate Broker
- ○ Salesperson

Applicant's Name (Please Print): _____

Applicant's Signature: _____

SPONSORING BROKER'S STATEMENT

As a Principal Broker holding an Arkansas Real Estate License, I hereby request that an active Arkansas real estate license be issued to the person named on this application.

Firm Name: _____Firm Phone: _____

Firm Address: _____PO Box (if any) _____

Firm City: _____ State: _____ Zip+4 _____

Name of Principal Broker (please print): _____

Email of Principal Broker (please print): _____

Signature of Principal Broker: _____

Principal Broker License Number: _____ Date: _____

Arkansas Real Estate Commission
Mailing Address:612 S. Summit, Little Rock, AR 72201
Telephone (501)-683-8010 Fax (501)683-8020
Website: http://www.arec.arkansas.gov

Background Acknowledgement Form

APPLICANT INFORMATION (Please fill out all the fields below and send to the AREC with your application):

Full Name:

Last First Middle

Social Security #: Date of Birth: State of Birth:

Residential Address:

Street Address City State Zip

I understand that my personal information and fingerprints submitted by agency are used to search against criminal identification records from both Arkansas Crime Information Center (ACIC) and Federal Bureau of Investigation (FBI). I hereby authorize the release of any records to the Arkansas Real Estate Commission, 612 South Summit Street, Little Rock, Arkansas, 72201-4740. I further understand ACIC and the FBI may also retain the submitted information and fingerprints as permitted by the Privacy Act of 1974, 5 USC § 552a, for routine uses beyond the principal purpose listed above.

Privacy Act Statement Privacy Act of 1974, 5 USC § 552a

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, maybe predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsibleagency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Obtaining Copy: Procedures for obtaining a copy of FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.30 through 16.33 or go to the FBI website at http://www.fbi.gov/about-us/cjis/background-checks.

Change, Correction, or Updating: Procedures for obtaining a change, correction, or updating of an FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.

SIGNATURE: _____ **DATE:** _____

SAMPLE Fingerprint Card

<u>You must obtain an original fingerprint card at a location of your choosing where your fingerprints will be taken.</u> The fingerprint card **<u>MUST</u>** have the print as shown in the image below. You may write in the information shown in the "ORI" and the "Reason Fingerprinted" boxes.

