

Montana Board of Realty Regulation
301 South Park Avenue 4th Floor
PO Box 200513
Helena, MT 59620-0513
PHONE: 406-444-2961 FAX: 406-841-2323
E-MAIL: dlibdsrre@mt.gov WEBSITE: www.realestate.mt.gov

APPLICATION PROCEDURES FOR REAL ESTATE BROKER LICENSE

**PLEASE ALLOW 10 TO 14 WORKING DAYS FOR PROCESSING AFTER RECEIPT OF ALL
REQUIRED DOCUMENTATION**

LICENSING REQUIREMENTS:

- Must be at least 18 years of age.
- Must provide evidence of graduation from an accredited high school or equivalent.
- Must have completed an additional 60 hours of pre-licensing instruction within the last 18 months from a school and instructor approved by the Board.
- Must have passed the Montana Broker Real Estate Examination with a score of 80% on the uniform portion and 80% on the state portion within the last 12 months.
- Must have two years experience as a licensed salesperson.
- Must have completed the following required activity criteria within 3 years of the date of application:
 - Minimum of 30 residential real estate transactions; or
 - Minimum of 10 commercial, agricultural or farm & ranch real estate transactions.

FEES FOR LICENSURE (Check each that apply)

- \$135.00 (new applications)
- \$100.00 If currently a licensed salesperson in Montana

Make check or money order payable to the Montana Board of Realty Regulation
DO NOT SEND CASH

APPLICATION PROCEDURES AND SUPPORTING DOCUMENTS: The following information and/or documentation is required. **A license will not be issued until all materials are received and approved.**

1. Completed application form and fees.
2. Completed activity sheet(s). The activity sheets supplied by the board must be used. Additional copies can be made as needed. No other form or computer printout will be accepted.
3. A copy of a high school diploma, transcript, G.E.D. certificate, or college diploma or transcript or military discharge papers.
4. A list of employment for the past five (5) years by occupation, time employed, name & address of employer. Include periods of unemployment, semi-retirement, etc. Do not leave any time gaps in the 5-year history.
5. Proof of 60 hours of approved real estate broker pre-licensing education taken within the last 18 months. Submit a copy of the completion certificate.
6. Proof of passing the AMP Broker exam. Submit copy of exam results taken within the last 12 months.
7. An original certified license history from any licensing jurisdiction in which a current real estate license is or has been previously issued.
8. A 2x2 photo attached to the application form in the space provided. The AMP exam photo is acceptable.

For Office Use Only
License # _____
Date _____
Issued: _____

Applicant must attach a photograph of himself / herself. The photograph must have been taken within the last year.

MONTANA BOARD OF REALTY REGULATION
301 South Park Avenue, 4th Floor
P O Box 200513
Helena, Montana 59620-0513
PHONE: (406) 444-2961 FAX: (406) 841-2323
E-MAIL: dlibsdrre@mt.gov WEBSITE: www.realestate.mt.gov

Application for Licensure as a Broker

Select Only One Appropriate Fee

- \$135.00-new licensees \$100.00- If currently a licensed salesperson in Montana

Application is Made by: (Check One)

- Examination Waiver (Prior Approval Required)
 Reciprocity Equivalency (Prior Approval Required)

1. FULL NAME _____
Last First Middle

2. OTHER NAME(S) KNOWN BY _____

3. BUSINESS NAME _____

4. BUSINESS ADDRESS _____
Street Address City and State Zip Country

MAILING ADDRESS (If Different) _____
PO Box # City and State Zip Country

5. HOME ADDRESS _____
Street or PO Box # City and State Zip Country

E-MAIL ADDRESS _____ WEB SITE ADDRESS _____

6. TELEPHONE: (____) _____ (____) _____ (____) _____
Business Home Fax

7. SOCIAL SECURITY NUMBER _____ FOREIGN ID NUMBER _____

8. DATE OF BIRTH _____ AGE _____ PLACE OF BIRTH _____
Month/ Day/Year City/State MALE FEMALE

9. LICENSEE NAME _____
(State your name as it should appear on the license if granted.)

10. TRUST ACCOUNT # OR TITLE COMPANY _____

BANK NAME _____

BANK LOCATION _____

11. LICENSEE SIGNATURE _____

12. List all real estate broker examinations that you have taken and the results. Attach additional sheet if necessary.

State Taken In	Exam Date	Results

All applicants must answer the following questions. If you answer yes, give specific details (names of organizations, dates, reasons, and outcome) on a supplement sheet.

13. Have you ever been denied the right to take a licensure examination in any state?
 If yes, attach a detailed explanation. Yes No
14. Has a licensing agency ever taken adverse or disciplinary action against your license (certificate)?
 If yes, attach a detailed explanation. Yes No
15. Has your license (certificate) ever been forfeited or surrendered? If yes, attach a detailed explanation. Yes No
16. Has a complaint ever been made against you alleging unethical behavior or unprofessional conduct?
 If yes, attach a detailed explanation. Yes No
17. Do you have criminal charges pending or have you ever pled guilty, forfeited bond, or been convicted of a crime (including a plea of no contest or deferred prosecution) whether or not an appeal is pending?
 You may omit charges or convictions prior to your 16th birthday.
 If yes, attach a detailed explanation and send in final order court papers. Yes No
18. Have you ever been expelled from or asked to resign from any professional organization or been censured by a professional organization of which you were a member? If yes, attach a detailed explanation. Yes No
19. Have you ever been charged with or convicted of a crime (including a plea of no contest or deferred prosecution) relating to, or committed, involving violence, use or sale of drugs, fraud, deceit, or theft, whether or not an appeal is pending? You may omit: (1) traffic violations for which you paid a fine of \$100.00 or less and (2) charges or convictions prior to your 16th birthday.
 If yes, attach a detailed explanation and send in the final order court papers. Yes No
20. Have you ever been charged with fraud, formally or informally, in any civil proceeding?
 If yes, attach a detailed explanation and send in final order court papers. Yes No
21. Have you any physical or mental condition which has in the past three years adversely affected your ability to practice this profession, including but not limited to, a contagious or infectious disease involving serious risk to the public? If yes, attach a detailed explanation. Yes No
22. Have you, within the last three years, used alcohol or any other mood-altering substance in a manner which adversely affected your ability to practice this profession? If yes, attach a detailed explanation. Yes No
23. Do you currently hold any type of real estate license in Montana or another state? If yes, provide the following information: (Attach a supplement sheet if necessary.) Yes No

State/Province/Territory	License Number	Date Issued	Is It Current	Type of License

I authorize the release of information concerning my education, training, record, character, license history and competence to practice, by anyone who might possess such information, to the Montana licensing program.

I hereby declare under penalty of perjury the information included in my application to be true and complete to the best of my knowledge. In signing this application, I am aware that a false statement or evasive answer to any question may lead to denial of my application or subsequent revocation of licensure on ethical grounds. I have read and am familiar with the applicable licensure laws of the State of Montana and instructions to applicants for licensing. I accept the rules and procedures outlined in these documents as the basis for my application.

I hereby declare that if a Montana Real Estate Broker's license is issued to me, I agree to conduct my Montana real estate business in Accordance with the laws of Montana and the rules of the Board of Realty Regulation.

Legal Signature of Applicant

Dated

TRANSACTIONS: RESIDENTIAL – The following must be provided by the Supervising Broker. Make copies of this form as needed.
 Please refer to ARM 24.210.611, for additional clarification of qualifications to obtain a broker license.

- ✓ **TRANSACTIONS MUST HAVE CLOSED WITHIN THE PAST THIRTY-SIX (36) MONTHS**
- ✓ **LICENSEE MUST HAVE OBTAINED AND WORKED WITH THE BUYER OR SELLER OR BOTH (COUNTS AS TWO TRANSACTIONS, IF BOTH)**
- ✓ **CO-LISTINGS AND TEAM TRANSACTIONS ARE GIVEN ½ CREDIT**
- ✓ **TRANSACTIONS OF THE APPLICANT AS AN EMPLOYEE, TRANSACTIONS IN WHICH THE APPLICANT IS A PRINCIPAL, AND MORTGAGE BROKER ACTIVITIES CAN NOT BE USED TO QUALIFY FOR A BROKER LICENSE**
- ✓ **A MAXIMUM OF FIVE (5) RESIDENTIAL LEASES ARE ELIGIBLE TO BE COUNTED AS CLOSED TRANSACTIONS**
- ✓ **FORM MUST BE COMPLETE AND BE TYPED OR PRINTED AND LEGIBLE**
- ✓ **IF MULTIPLE TRANSACTIONS FOR THE SAME SELLER OR BUYER, PLEASE EXPLAIN AND INDICATE ANY OWNERSHIP INTEREST OF APPLICANT**

1. BUYERS NAME 2. SELLERS NAME	PROPERTY ADDRESS	1. COMPANY/AGENT FOR BUYER 2. COMPANY/AGENT FOR SELLER	CLOSING DATE
1.		1.	
2.		2.	
1.		1.	
2.		2.	
1.		1.	
2.		2.	
1.		1.	
2.		2.	
1.		1.	
2.		2.	
1.		1.	
2.		2.	
1.		1.	
2.		2.	

Broker Signatures: _____ **Date:** _____

TRANSACTIONS: COMMERCIAL/AGRICULTURAL/FARM & RANCH – The following must be provided by the Supervising Broker. Make copies of this form as needed. Please refer to ARM 24.210.611, for additional clarification of qualifications to obtain a broker license.

- ✓ **TRANSACTIONS MUST HAVE CLOSED WITHIN THE PAST THIRTY-SIX (36) MONTHS**
- ✓ **LICENSEE MUST HAVE OBTAINED AND WORKED WITH THE BUYER OR SELLER OR BOTH (COUNTS AS TWO TRANSACTIONS, IF BOTH)**
- ✓ **CO-LISTINGS AND TEAM TRANSACTIONS ARE GIVEN ½ CREDIT**
- ✓ **A MAXIMUM OF TWO (2) COMMERCIAL LEASES ARE ELIGIBLE TO BE COUNTED AS CLOSED TRANSACTIONS**
- ✓ **AGRICULTURAL/FARM & RANCH MUST BE A MINIMUM OF 30 ACRES TO QUALIFY**
- ✓ **TRANSACTIONS OF THE APPLICANT AS AN EMPLOYEE, TRANSACTIONS IN WHICH THE APPLICANT IS A PRINCIPAL, AND MORTGAGE BROKER ACTIVITIES CAN NOT BE USED TO QUALIFY FOR A BROKER LICENSE**
- ✓ **FORM MUST BE COMPLETE AND BE TYPED OR PRINTED AND LEGIBLE**
- ✓ **IF MULTIPLE TRANSACTIONS FOR THE SAME SELLER OR BUYER, PLEASE EXPLAIN AND INDICATE ANY OWNERSHIP INTEREST OF APPLICANT**

1. BUYERS NAME 2. SELLERS NAME	PROPERTY ADDRESS	1. SELLING AGENT 2. LISTING AGENT	CLOSING COMPANY	CLOSING DATE
1.		1.		
2.		2.		
1.		1.		
2.		2.		
1.		1.		
2.		2.		
1.		1.		
2.		2.		
1.		1.		
2.		2.		
1.		1.		
2.		2.		
1.		1.		
2.		2.		

Broker Signature: _____ **Date:** _____

TRANSACTIONS: VACANT LAND – The following must be provided by the Supervising Broker. Make copies of this form as needed.
 Please refer to ARM 24.210.611, for additional clarification of qualifications to obtain a broker license.

- ✓ **TRANSACTIONS MUST HAVE CLOSED WITHIN THE PAST THIRTY-SIX (36) MONTHS**
- ✓ **LICENSEE MUST HAVE OBTAINED AND WORKED WITH THE BUYER OR SELLER OR BOTH (COUNTS AS TWO TRANSACTIONS, IF BOTH)**
- ✓ **CO-LISTINGS AND TEAM TRANSACTIONS ARE GIVEN ½ CREDIT**
- ✓ **TRANSACTIONS OF THE APPLICANT AS AN EMPLOYEE, TRANSACTIONS IN WHICH THE APPLICANT IS A PRINCIPAL, AND MORTGAGE BROKER ACTIVITIES CAN NOT BE USED TO QUALIFY FOR A BROKER LICENSE**
- ✓ **FORM MUST BE COMPLETE AND BE TYPED OR PRINTED AND LEGIBLE**
- ✓ **IF MULTIPLE TRANSACTIONS FOR THE SAME SELLER OR BUYER, PLEASE EXPLAIN AND INDICATE ANY OWNERSHIP INTEREST OF APPLICANT**

1. BUYERS NAME 2. SELLERS NAME	PROPERTY ADDRESS	1. SELLING AGENT 2. LISTING AGENT	CLOSING COMPANY	CLOSING DATE
1.		1.		
2.		2.		
1.		1.		
2.		2.		
1.		1.		
2.		2.		
1.		1.		
2.		2.		
1.		1.		
2.		2.		
1.		1.		
2.		2.		

Broker Signature: _____ **Date:** _____

