

INSTRUCTIONS AND CHECKLIST FOR UNLAWFUL LICENSE ACTIVITY STATEMENT FORM

DO NOT SUBMIT APPLICATIONS BY FAX OR E-MAIL

Under A.A.C. R4-28-306, Unlawful License Activity means:

- The performance of acts requiring a license under A.R.S. § 32-2122 by a person who does not hold a current and active license;
- The performance of acts requiring a license by a person on behalf of a broker other than the person's employing broker; or
- A broker's employment of a person as a salesperson or broker if the person does not hold a current and active license issued to the person under that employment.

Submit the following:

1. A completed and signed Unlawful License Activity Statement Form.
2. A written, signed explanation of why the unlawful license activity occurred, identifying all unlawful license activity that the person performed, and acknowledging that no additional activities requiring a license shall be conducted unless and until the person's license is current and returned to active status.
3. A written and signed statement from the employing broker's designated broker identifying all unlawful license activity conducted on behalf of the employing broker license.
4. Under R4-28-306 the Department may require additional information and documents.

If you have a current license, you may submit a change of license status. If your license has expired the Department will not process a change of status until you have renewed your license and resolved any unlawful license activity or other violations.

Refer to A.A.C. R4-28-303 and R4-28-306

"AN EQUAL EMPLOYMENT OPPORTUNITY AGENCY"

This form is available in alternate formats by contacting the Operations Office at 602-771-7760 or by email at forms@azre.gov



STATE OF ARIZONA
DEPARTMENT OF REAL ESTATE

2910 N 44th St, Ste 140
Phoenix, AZ 85018
(602) 771-7700

400 W Congress, Ste 523
Tucson, AZ 85701
(520) 628-6940

You can do more than renew online! Go to Online Services at www.azre.gov

UNLAWFUL LICENSE ACTIVITY STATEMENT FORM

Refer to the **Checklist and Instructions** to determine if you must file this form and for required documentation.

PLEASE COMPLETE THE FOLLOWING INFORMATION - TYPE OR PRINT LEGIBLY

Applicant/Entity Legal Name	
Applicant/Entity License Number	Exp. Date (mo/yr)
Applicant/Entity Address <input type="checkbox"/> Business <input type="checkbox"/> Residence Street Address (include Apt or Suite) _____ City, State, Zip Code _____	
If Applicant is Not Employing Broker, Employing Broker's (Entity) Legal Name:	
Employing Broker's (Entity) License Number	Exp. Date (mo/yr)
Name of Designated Broker (if different than applicant)	

- Designated Brokers Only: Did one or more employees perform activities requiring a license when the person or persons did not hold a current license issued to the employing broker (entity) OR while the employing broker's license was expired or inactive status? (If you are not a Designated Broker, answer "No") Yes No
- Did you or the employing broker (entity) conduct any activities requiring a license after either license **expired**? (If your license was not expired, answer "No"). Yes No
- Did you or the employing broker (entity) conduct any activities requiring a license while either license was on **inactive** status? (If your license was not inactive, answer "No"). Yes No
- Did your activity or the activity of employees on behalf of the employing broker (entity) result in any offers or contracts to sell, lease, list or manage real estate, cemetery property or membership camping contracts?
 Yes No

I declare that the information that I have provided is completed, true and correct.

X _____
Signature of Applicant

Date

If you must truthfully answer "yes" to any of these questions, follow the instructions for this form concerning your detailed written and signed statement.

"AN EQUAL EMPLOYMENT OPPORTUNITY AGENCY"

This form is available in alternate formats by contacting the Operations Office at 602-771-7760 or by email at forms@azre.gov