IL 505-0580 (Rev 10/20)

ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
DIVISION OF REAL ESTATE
320 WEST WASHINGTON STREET
SPRINGFIELD, IL 62786

REAL ESTATE BROKER REINSTATEMENT

2020 REAL ESTATE BROKER REINSTATEMENT APPLICATION AND INSTRUCTIONS

READ INSTRUCTIONS BEFORE Completing THIS FORM

1. Complete and print page 2 of this document and MAIL with correct fee to the above address. THIS FORM CANNOT BE SUBMITTED ELECTRONICALLY.

| License fee on or before: | 09/30/2020 | $150.00 |
| License fee on or after:  | 10/01/2020  | $200.00 |

2. Payment must be in the form of a check or money order made payable to the Illinois Department of Financial and Professional Regulation. FEES ARE NOT REFUNDABLE. After reading the following instructions, if you have any questions call 800/560-6420.

3. Please make any name and/or address changes for your license in the area provided. A P.O. Box must be accompanied by a street address. CHANGE OF NAME MUST BE ACCOMPANIED BY DOCUMENTARY PROOF (ie., certified or photocopy of a marriage certificate, divorce decree, or court order). A COPY OF YOUR SOCIAL SECURITY CARD OR DRIVERS LICENSE IS NOT ACCEPTABLE.

4. If you are changing sponsors, or the sponsor number is incorrect, or no number is indicated, your sponsor must complete a SPONSOR CARD or Sponsorship change on the IDFPR Portal. This requires a $25 fee in addition to the reinstatement fee.

5. Continuing Education Requirements:

   12-Hours of CE:
   All Brokers must complete 12 hours of CE (a 4-hour Core course and a minimum of 8 hours of Elective courses). Do not submit documentation with the reinstatement application. Retain all of your original CE certificates of completion.
   - 1-Hour of Sexual Harassment Prevention Training is mandatory for all renewing licensees with a CE requirement. The course may be taken with or without CE credit. See FAQ's for this requirement here.

   45-Hours of Post License Education (if this is your FIRST RENEWAL):
   Brokers renewing for the FIRST TIME must complete 45-Hours of Post License education prior to submitting their reinstatement application.

   CE Exemptions: Licensees who have served in the armed services of the United States during the pre-renewal period, and Illinois licensed attorneys who hold a current ARDC card (a copy of the card must be provided with this form).

6. This form must be signed by the applicant. The managing broker only needs to sign this form if you are changing your sponsoring broker at this reinstatement.

7. The traditional paper license will no longer be produced by IDFPR. Licensees may obtain their license(s) by going to https://www.idfpr.com/getmylicense.

***Check out our website - www.idfpr.com–For information regarding IDFPR updates and on-line reinstatements***

Practice of real estate after the expiration of your license shall constitute unlicensed practice which may result in civil/criminal penalties and discipline of your license.

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**2020 BROKER REINSTATEMENT**

<table>
<thead>
<tr>
<th>LICENSE NO.:</th>
<th>SPONSOR LICENSE NO.:</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME:</td>
<td>SPONSOR NAME:</td>
</tr>
<tr>
<td>ADDRESS:</td>
<td>□ CHECK HERE IF CHANGE OF SPONSOR (Include $25 fee)</td>
</tr>
<tr>
<td>ADDRESS LINE 2:</td>
<td>MANAGING BROKER NAME:</td>
</tr>
<tr>
<td>CITY, STATE, ZIP:</td>
<td>MANAGING BROKER LICENSE NO.:</td>
</tr>
<tr>
<td>□ CHECK HERE IF CHANGE OF ADDRESS</td>
<td></td>
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ALL QUESTIONS MUST BE ANSWERED – Incomplete applications will be returned.

YES  NO

□ □ Are you more than 30 days in arrears on court ordered Child Support Payments?

**CONTINUING EDUCATION REQUIREMENTS- (CHECK ONE ONLY).**

□ I have fully complied with the CE requirements for this renewal period. (CE must be taken prior to submission of this reinstatement application) DO NOT SUBMIT CE CERTIFICATES OF COMPLETION WITH THIS REINSTATEMENT.

□ I am exempt from the CE requirements in accordance with the Real Estate License Act of 2000.

I understand that if I provide false/fraudulent information, I could lose my license, be fined up to $25,000 or have other penalties assessed. Therefore, I declare that I have examined this form, and to the best of my knowledge, all statements are true, correct, and accurate. In addition, my signature authorizes the Illinois Department of Financial and Professional Regulation to conduct criminal background investigations. I also certify that the sponsoring broker indicated above (or indicated on a completed Sponsor Card if changing sponsors) is my sponsoring broker.

Printed Name __________________________________________ E-mail address ________________________________

Your Signature __________________________________________

Social Security Number ___________________________ Sex M ☐ or F ☐

(Disclosure of applicant's Social Security Number is mandatory pursuant to 42 U.S.C. 666(a)(13) and 5 ILCS 100/10-65(c) for use under the State's child support enforcement program.)

Managing Broker Signature* ______________________________

*Required only if changing sponsoring broker on Sponsor Card.

Managing Broker License # __________________________________________

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