REAL ESTATE LICENSING REQUIREMENTS FOR ATTORNEYS

In accordance with R.I. General Laws § 5-20.5-4 (d) of the Rhode Island Real Estate Laws, “When an attorney at law, licensed by the Supreme Court of the State of Rhode Island, desires to have a Real Estate Broker’s License or a Real Estate Salesperson’s License, the attorney, by application, and upon payment of the applicable fee, as provided in § 5-20.5-11, shall be granted a license without examination.”

All Real Estate Licenses expire on April 30th of an even-numbered year, and are renewed for a two-year period.

To apply for a Rhode Island Real Estate Broker License, you must submit the following:

1. A Completed Broker Application
2. Certification from the Rhode Island Supreme Court or Current Membership Certificate from the Rhode Island Bar Association
3. A Lead Poisoning/Lead Hazard Mitigation Course Certificate (not less than three (3) hours. (See website: www.dbr.ri.gov for Lead Paint Providers)
4. A Certificate of Errors and Omissions Insurance, in accordance with Rhode Island General Laws § 5-20.5-25. A Lawyer’s Professional Liability Policy does not meet the requirements of § 5-20.5-25, Real Estate Broker Activities
5. A Criminal History Record from the Rhode Island Attorney General’s Office
6. A Tax Payer Status Affidavit / Identity Verification

Submit checks as follows:

a. $180.00: payable to the Rhode Island General Treasurer (this includes the $10.00 Application Fee and the $170.00 two-year license fee); for licenses issued from May 1st of an even-numbered year to April 30th of an even-numbered year; or

b. $95.00: payable to the Rhode Island General Treasurer (this includes the $10.00 Application Fee and the $85.00 license fee); for licenses issued from May 1st of an odd-numbered year to April 30th of an even-numbered year, i.e., less than one year.

c. $25.00: payable to the Real Estate Recovery Account.

INCOMPLETE APPLICATIONS WILL BE RETURNED.
REAL ESTATE BROKER APPLICATION

1. Name of Applicant: 
2. Date of Birth: 
3. Age: 
4. Legal Resident
   Yes ☐    No ☐

5. Residential Address: City / Town
   State Zip Code

6. Telephone Number:
7. Email Address:
8. Social Security Number:

9. Present Occupation:

10. Real Estate Agency Name & Address: Street / City / Town
    State Zip Code

11. Principal Broker’s Name: License Number:
    OR;
    Will you be the Principal Broker of the Agency mentioned in # 10 above? Yes ☐   No ☐

12. Have you ever been refused a Real Estate Broker or Salesperson License by this State, or any other state? Yes ☐   No ☐

13. Have you ever had a Real Estate Broker or Salesperson License Suspended or Revoked in this State, or any other state? Yes ☐   No ☐

14. Have you ever been convicted of, or plead guilty or nolo contendere to forgery, embezzlement, obtaining money under false pretenses, bribery, larceny, extortion, conspiracy to defraud, or any other offenses of any type which would reasonably cause the Department to question your honesty, trustworthiness, integrity, good reputation or competency? Yes ☐   No ☐

IF YOU ANSWERED “YES” TO QUESTIONS 12 - 14, ATTACH A FULL EXPLANATION.

15. Occupations Engaged in During the Past Five Years:

16. Attach Official Certificates of all Educational Courses on Real Estate successfully completed as defined in Rhode Island General Laws 5-20.5.19.
17. **NOTE:** Law requires recommendations of three (3) residents of Rhode Island who have known the applicant for at least three (3) years and are not related to the applicant and will attest that the applicant bears a good reputation for honesty and trustworthiness, and who will recommend that a license be issued to the applicant.

<table>
<thead>
<tr>
<th>Name:</th>
<th>Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Print)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name:</th>
<th>Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Print)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name:</th>
<th>Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Print)</td>
<td></td>
</tr>
</tbody>
</table>

**STATEMENT OF APPLICANT:**

I HEREBY AFFIRM THAT ALL ANSWERS ARE TRUE.

______________________________
Signature of Applicant

______________________________
Subscribed and Sworn at: (City and State)

BEFORE ME: __________________________
Notary Public

DATE: ____________________________, 20___.
CRIMINAL HISTORY RECORD SUBMISSION REQUIREMENTS

FOR BROKER AND SALESPERSON APPLICANTS

A Criminal History Record ("CHR") must be submitted to the Real Estate Section, Department of Business Regulation ("DBR"), Division of Commercial Licensing and Racing and Athletics, with each Real Estate Application. Processing an application is contingent upon the complete disposition, or results of any charges delineated or resolved prior to application submission. See instructions below to learn how to obtain your CHR.

INSTRUCTIONS

Applying in Person: A Criminal History Record may be obtained by visiting the Bureau of Criminal Identification at the Rhode Island Department of Attorney General ("DAG"). To apply for a CHR in this manner, bring a picture-identification, showing your date of birth.

Applying by Mail: To apply by mail, send a notarized copy of a photo ID, showing your date of birth, and a signed/notarized letter, giving permission to the DAG to conduct a background investigation, along with a self-addressed stamped envelope.

The cost for a CHR, whether applying in person or by mail, is five dollars ($5.00), and is payable by check or money order to the "BCI". Please allow time for the DAG to process and generate your request. For further questions about this process, you may contact the DAG at the telephone number below.

If you reside in another state, supply a CHR from your home state, as well as one from Rhode Island.

Contact Information for the Department of Attorney General:

- 150 South Main Street, Providence, Rhode Island.
- Telephone Number: (401) 274-4400
- Hours of operation are 8:00 a.m. to 4:30 p.m.
Tax Payer Status Affidavit / Identity Verification

All persons applying or renewing any license, registration, permit or other authority (hereinafter called "licensees") to conduct a business or occupation in the state of Rhode Island are required to file all applicable tax returns and pay all taxes owed to the state prior to receiving a license as mandated by State law (RIGL 5-76) except as noted below.

In order to verify that the State is not owed taxes, licensees are required to provide their Social Security Number and Federal Tax Identification Number as appropriate. These numbers will be transmitted to the Division of Taxation to verify tax status prior to the issuance of a license. This declaration must be made prior to the issuance of a license.

Please return this affidavit along with your license application to: Rhode Island Department of Business Regulation, 1511 Pontiac Avenue, Cranston, RI 02920.

<table>
<thead>
<tr>
<th>Licensee Declaration</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ I hereby declare, under penalty of perjury, that I have filed all required State tax returns and have paid all taxes owed.</td>
</tr>
<tr>
<td>☐ I have entered a written installment agreement to pay delinquent taxes that is satisfactory to the Tax Administrator.</td>
</tr>
<tr>
<td>☐ I am currently pursuing administrative review of taxes owed to the State.</td>
</tr>
<tr>
<td>☐ I am in Federal Bankruptcy. (Case #: __________________________)</td>
</tr>
<tr>
<td>☐ I am in State Receivership. (Case #: __________________________)</td>
</tr>
<tr>
<td>☐ I have been discharged from Bankruptcy. (Case #: __________________________)</td>
</tr>
</tbody>
</table>

Type of Professional License for which you are applying: __________________________

Full Name: (Please Print or Type) __________________________

Social Security Number: (or FEIN if appropriate) __________________________

Signature: __________________________

Phone Number (including area code): __________________________

Date: __________________________