



Real Estate Commission
 NH OPLC – Technical Division
 121 S Fruit St, Ste 201, Concord, NH 03301
 Tel (603) 271-2701 Fax (603) 271-7928 <http://www.oplc.nh.gov/real-estate-commission/index.htm> E-mail: nhrec@nh.gov

Expiration Date	
License #	Date Processed
License Dates	Form#
Broker Ref. #	Work Location Ref. #
Check #	Amount

FORM 7-RE
 SALES REN.
 REV.12/15

APPLICATION FOR RENEWAL OF SALESPERSON'S LICENSE

RENEWAL FEE \$90.00

Renewal is permitted up to 6 months after expiration with an additional \$60.00 late penalty fee. (Please note: During the 6 month late renewal period after expiration date, you are not permitted to practice real estate.)

Make checks payable to: TREASURER, STATE OF NEW HAMPSHIRE

PRINT OR TYPE. All questions must be answered in full. Do not leave any section of application blank, except where instructed to do so.

MR MRS MS

Applicant's Full Legal Name: _____ Date of Birth: _____

Resident Physical Address: _____

Resident Mailing Address: _____

Resident Tel./Cell #: _____ / _____ E-mail: _____

It is important to keep your e-mail address up to date so the Commission can notify you of any law and/or administrative rule changes by e-mail. Please check the e-mail address you prefer to have notices sent to Resident Business. If you don't have an e-mail address, the Commission will send notification of any changes by postcard.)

Which of the following is applicable?

License status:

- Inactive (Submit 3 hour approved "core" continuing education affidavit and answer questions 2-6)
- Active (Submit 3 hour approved "core" and 12 hours approved "elective" continuing education affidavits and answer questions 1-7)

CONTINUING EDUCATION: Lists of approved core and elective courses may be found on the Commission web site at www.oplc.nh.gov/real-estate-commission/index.htm under licensing. Should you wish to have copies faxed or mailed to you, please contact the Commission at 603-271-2748. All courses must be completed within your 2 year renewal period.

1. The principal broker with whom you are employed or under contract with as a real estate salesperson? _____
 Business Name: _____
 Business Physical Address: _____
 Business Mailing Address: _____
 Business Tel. #: _____ Business Fax #: _____ Business E-mail: _____

NOTE: IF ANY OF THE ABOVE INFORMATION HAS CHANGED SINCE YOUR LAST RENEWAL AND YOU HAVEN'T YET FILED A FORM 5-RE (AMENDMENT NOTIFICATION FORM) WITH THIS OFFICE, YOU WILL NEED TO DO SO BEFORE WE CAN PROCESS THIS RENEWAL REQUEST.

ALL OF THE FOLLOWING QUESTIONS MUST BE ANSWERED WITH A YES OR NO ANSWER.

- 2. Have you, since your last original or renewal application, been through bankruptcy or insolvency or made a compromise with your creditors? ____ If "yes", please attach a letter of explanation including amount and name of court or lien holder.
- 3. Are there any undischarged court judgments or liens against you at this time? ____ If "yes", attach a letter of explanation, including the amount and name of court or lien holder.
- 4. Have you, since your last original or renewal application, been convicted of a felony or misdemeanor offense that has not been annulled by a court? ____ If "yes", contact the Commission at 603-271-4127 for an Arrest and Conviction Form or obtain the form from the Commission web site at www.oplc.nh.gov/real-estate-commission/index.htm under the licensing section.
- 5. Have you, since your last original or renewal application, been or currently involved in any matters which may affect your good repute or trustworthiness or have any relation to or bearing upon whether you are entitled to public confidence? ____ If "yes", attach a letter of explanation giving full details.
- 6. Have any licenses, which you have held to sell real estate been subject to disciplinary action in any state since your last original or renewal application? ____ If "yes", attach a letter of explanation disclosing which jurisdiction(s), details of offense(s) and details of disciplinary action(s).
- 7. Do you understand that your salesperson's license permits you to work only for the principal broker named on your license? ____

IF YOU ANSWERED "YES" TO QUESTIONS 2, 3, 4, 5 OR 6, THE REQUIRED INFORMATION MUST BE ATTACHED OR YOUR RENEWAL WILL NOT BE PROCESSED.

RSA 331-A makes the following provisions: (A yes or no answer is required below)

- (a) When you change your employment as a real estate salesperson from one licensed principal broker to another the broker must promptly notify the Real Estate Commission by completing a Form 5-RE, Amendment Notification/Request Form and submitting it together with your wall certificate, pocket id card and \$20.00 fee.
- (b) If your employment as a salesperson under a licensed principal broker is terminated, your license will lapse unless you obtain employment by a broker within two (2) years or request in writing to place your license in an inactive status.
- (c) Salesperson's license shall be mailed to the principal broker, or in the case of a branch office, the managing broker.
- (d) Your license will expire two years from date of expiration and failure to renew such license will automatically cause your license to expire. If your license expires, you may reinstate your license up to six (6) months from the expiration date by submitting the required documents and renewal fee plus a late renewal penalty. If you fail to renew within this six-month period, your license will lapse and you will have to meet all the qualifications of a new candidate. However, the Commission may renew a lapsed license within a reasonable time from the date of lapse for good cause shown as required by RSA 331-A:18, II.
- (e) Do you understand the above provisions of the law? _____

* * * * * All Applicants Must Provide A Notarized Signature Below * * * * *

SIGNATURE OF APPLICANT

State of _____

County of _____

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

NOTARY PUBLIC/JUSTICE OF THE PEACE

(NOTARY SEAL)

My commission expires: _____

SALESPERSON AFFILIATION FORM

Upon receipt of the license herein applied for, the following applicant: _____ will be employed by me or will otherwise be under contract with me to perform services as a real estate salesperson, and will work under my supervision. I will display his/her license prominently at my place of business, and when he/she leaves my employ I will notify the New Hampshire Real Estate Commission as required by RSA 331-A:17, IV, and Rea 404.02 within 5 days of termination and return his/her wall license and pocket id to the Commission.

To the best of my knowledge the applicant is of good moral character and is trustworthy and the information provided by the applicant on this application is true and accurate.

Principal Broker's Name: _____

Business/Firm Name: _____

Business Address: _____

Business Phone: _____ Principal Broker License #: _____

SIGNATURE OF PRINCIPAL BROKER

State of _____

County of: _____

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

(NOTARY SEAL)

NOTARY PUBLIC/JUSTICE OF THE PEACE

My commission expires: _____

PLEASE RETURN THIS EDUCATION EVALUATION WITH YOUR RENEWAL APPLICATION

"CORE" COURSE School/Instructor Name: _____

Date attended: _____ Location of Course: _____

(Check One)

Was the material presented adequately?.....

Yes No

Was the information received of value to you?

Yes No

Were you provided with an opportunity to ask questions?

Yes No

Were you provided with reference or written materials?

Yes No

In your opinion was the course worthwhile?

Yes No

Please provide any comments you may have on the course content and/or the school or instructor: _____

ELECTIVE COURSE Title and Course Number: _____

Name of School/Instructor: _____

Date Attended: _____ Location of Course: _____

(Check One)

Was the material presented adequately?.....

Yes No

Was the information received of value to you?

Yes No

Were you provided with an opportunity to ask questions?

Yes No

Were you provided with reference or written materials?

Yes No

In your opinion was the course worthwhile?

Yes No

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ELECTIVE COURSE Title and Course Number: _____

Name of Instructor/School: _____

Date Attended: _____ Location of Course: _____

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Credit Card Sheets are not accepted via e-mail

You may pay your fee with a credit card by filling out this form. Please make sure that all information is correct and up to date. Indicate what the fee is for under transaction type.

This page will be destroyed after the transaction has taken place.

Transaction Type:		Amount Due:	
Card Type: (please select one) <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard (required)			
Card Number			(required)
Expiration Date:	Month:	Year:	(required)
Billing Name and Address (your billing address must match the address associated with the credit card you are using.)			
Name on Card:			
Billing Address:			
City:			
State/Province:			
Zip/Postal Code:			
Country:			
Authorization Signature :			