



APPLICATION FOR A REAL ESTATE CORPORATION/PARTNERSHIP LICENSE

478 - 479

ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

Division of Real Estate
PO Box 7570
Springfield, Illinois 62791-7570
FPR.Realestate@illinois.gov

Important Notice: Completion of this form is necessary to accomplish the requirements outlined in the Illinois Real Estate License Act 2000 (225 ILCS 454). Disclosure of this information is **REQUIRED**. Failure to comply may result in this form not being processed. This form has been approved by the Agency Forms Coordinator.

CORPORATIONS, PARTNERSHIP AND LIMITED PARTNERSHIPS INSTRUCTIONS FOR FILING

Do not use this application if you are setting up a Corporation for Indirect Payment of Compensation. For more information please visit our website at <https://www.ilga.gov/commission/jcar/admincode/068/068014500G07450R.html>

1. Type or print legibly. Forward a fee of **\$250** in the form of a **check or money order**, made payable to the Illinois Department of Financial and Professional Regulation. **FEE IS NOT REFUNDABLE.**
2. Assumed Name (DBA) - If an assumed name will be used, attach a certified copy of the assumed name certificate, obtainable from the county clerk (partnership) or the Illinois Secretary of State (corporation).
3. Attach a list of all officers within the corporation or all general partners within the partnership. This is in accordance with Article 5 of the Real Estate License Act of 2000, which states in part, that *"No partnership or corporation shall be granted a license, or engage in the business or capacity, either directly or indirectly, of a real estate broker, unless every general partner in such partnership holds a license as a managing broker or broker or every officer of such corporation who actively participates in the brokerage business of such corporation holds a license as a managing broker or broker, and unless every employee who acts as a leasing agent for such a partnership or corporation holds a license as a broker or leasing agent. No partnership or corporation shall be licensed to conduct a brokerage business where an individual leasing agent or group of leasing agents owns or directly or indirectly controls more than 49% of the shares of stock or other ownership in the partnership or corporation."*
4. A Federal Employer Identification Number (FEIN) is required; if a FEIN has not been issued, a photocopy of the FEIN application must be forwarded with this application.
5. **CORPORATIONS ONLY** - In addition to 1, 2, 3 and 4 attach an affidavit of nonparticipation for each unlicensed officer and director of the corporation and one of the appropriate documents issued by the Illinois Secretary of State, as follows:
 - a. Illinois Corporations – Submit a complete copy of the Articles of Incorporation.
 - b. Foreign Corporations (those incorporated outside of Illinois) – Submit a complete copy of the Articles of Authority to conduct business in Illinois.

NOTE: The Articles of Incorporation must be filed with the Illinois Office of the Secretary of State.

6. **PARTNERSHIPS ONLY** - In addition to 1, 2, 3 and 4 attach an affidavit stating that the partnership has been legally formed.
7. **LIMITED PARTNERSHIPS ONLY**- In addition to 1,2,3 and 4, attach an Affidavit stating that the Limited Partnership has been legally formed as well as an affidavit of nonparticipation for each unlicensed limited partner. Also, submit a letter of authority from the Illinois Secretary of State Limited Partnership Department.

NOTE: Limited partnerships must be filed with the Illinois Office of the Secretary of State.

8. The managing broker of the firm must associate/transfer himself/herself and all licensees employed by the firm only **AFTER** receipt of the firm license. A properly completed sponsor card and the applicable fee must be submitted for each transaction.



REAL ESTATE CORPORATION/PARTNERSHIP INFORMATION FORM 478 – 479

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TYPE OF FIRM: **PARTNERSHIP** **CORPORATION** **LIMITED PARTNERSHIP**

Company Name	Assumed Name (DBA), if applicable	Date of Organization
Address (Street, City, State, Zip Code)	FEIN Number	Telephone Number (____) _____ - _____
Name of Managing Broker	Managing Broker License Number	Firm License Number (If Applicable)
Name of Principal Filing Application	Business Address of the Registering Principal (Street, City, State, Zip Code)	
	Managing Broker's Email Address:	

List All Officers, Directors, General Partners and All Limited Partners

Name	Illinois Real Estate License Number	Title(indicate officer, director, gen. partner)	Illinois Business Address(Street, City, State, Zip Code)

List All Persons and/or Entities having an Ownership Interest in Excess of 10 Percent

Name/Entity	Illinois Real Estate License Number	Percent of Ownership	Illinois Business Address (Street, City, State, Zip Code)

I hereby certify that I personally completed this form, that the information is true and correct, to the best of my knowledge and belief, and that I am a principal of the above-named company in Illinois. I further certify that each principal not licensed in the State of Illinois is not actively participating in the brokerage business as defined in the Illinois Real Estate License Act of 2000, Sec. 5(15).

Signature of Applicant _____

I hereby certify that that the answers appearing hereon are true and correct to the best of my knowledge and belief, and that I am legally authorized to sign for this firm.

Signature of Managing Broker _____ Date _____



CONSENT TO EXAMINE AND AUDIT SPECIAL ACCOUNTS

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- I **have** one or more special accounts, and authorize a representative of the Illinois Department of Financial and Professional Regulation to examine those accounts. (Please complete both Parts A and B of this form.)
- I **do not** accept escrow monies, and do not hold monies belonging to others. Therefore, I do not maintain any special accounts. (Please complete only Part A of this form.)

PART A: SPONSORING BROKER INFORMATION

1. Name of Individual Managing Broker (Sole Proprietor), Partnership, Corporation, or Limited Liability Company

2. Business Address (Street, City, State, Zip Code)

3. Telephone Number (_ _ _) _ _ _ - _ _ _ _

4. License Number

Email Address:

PART B: DEPOSITORY AT WHICH REAL ESTATE SPECIAL ACCOUNT(S) ARE MAINTAINED. A separate Consent to Audit form is required for each depository at which you maintain special account(s). Copy this form as needed.

1. Name and address of Bank or Savings and Loan Association

2. Specific Special Accounts to be Examined and Audited

Title(s) of Special Account(s)	Account Number	Identifying Number(s) Required by IRS (FEIN or Social Security No.)

3. List Those Persons Authorized to Withdraw Funds From the Above-Named Special Account

Name	Sex	Title	License Number

I hereby authorize the above named-depository to allow, at any time, a duly authorized representative of the Department of Financial and Professional Regulation to examine and audit the above named special account(s). I am one of the individuals listed under Part B (3) above.

Signature of Managing Broker _____

License Number _____

Date _____

Title _____