



## Application for a Real Estate and Business Agent’s licence - (Firm/Partnership)

Please use a pen and write using BLOCK LETTERS. Tick  where appropriate

### Application Requirements

This form must be completed and signed by the person in *bona fide* control of the agency.

**Your application can not be assessed unless ALL sections are completed and ALL information is provided. It is essential that you DO NOT LEAVE ANY SECTION BLANK – Use ‘N/A’ or ‘Nil’ where appropriate.**

This application **must** also be accompanied by the prescribed fee and those additional items listed in the Application.

The list of current fees is available at [www.commerce.wa.gov.au/CP/licensingfees](http://www.commerce.wa.gov.au/CP/licensingfees).

### Emails

The Department will utilise your nominated email address/es for contact purposes, please ensure that the email address/es provided in this application are correct, and that you notify the Department of any future changes.

### Notice of application and objections

A notice of your intention to apply for a licence will be placed in the public notices section of *The West Australia* newspaper. Any person may object to the grant of a licence within 7 days of the notice being published.

### 1. Details of applicant

**Name of Firm (Partnership):**

Includes names of each partner

**ABN:** (if applicable)

**Business Name under which the firm intends to trade:** (if applicable)

NOTE: Every applicant who intends to carry business under a business name must have that business name registered under *Business Names Registration Act 2011* with the Australian Securities and Investments Commission. For information about business names registration requirements visit [www.asic.gov.au](http://www.asic.gov.au).

**Contact Email Address:**

**Business Phone Number:**

**Business Fax Number:**

Department of Commerce  
Consumer Protection  
Ground floor “Forrest Centre”  
219 St Georges Terrace  
PERTH WA 6000

Locked Bag 14  
Cloisters Square WA 6850

Licensing Advice Line  
8:30am to 5.00pm  
Monday to Friday  
Tel: 1300 30 40 64

Overseas Callers  
+61 8 9282 0459

Email  
[licensingenquiries@commerce.wa.gov.au](mailto:licensingenquiries@commerce.wa.gov.au)

Web Site  
[www.commerce.wa.gov.au/CP/licences](http://www.commerce.wa.gov.au/CP/licences)

Consumer Protection Advice Line  
Tel: 1300 30 40 54

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## 2. Members of the Firm (Partnership)

Please note that where there are up to three (3) partners, at least one of them must be a licensed real estate and business agent. For a firm with four (4) or more partners, at least two (2) partners must be licensed real estate and business agents.

Please include in the space below details of all members of the firm (including any body corporate entities). Please indicate by placing a  next to the name of those members holding a real estate and business agent licence. Additionally, place an asterisk (\*) next to the name of the licensed member who is to be the person in bona fide control (if applicable).

Name of Partner	Address	Date of Birth/Registration	Email address

*If there is insufficient space, please attach a page giving full details as above.*

## 3. Company Directors

Please include in the space below details of all directors of any body corporate listed as a partner above.

Company Name	Directors	Home address	Date of Birth	Email address

*If there is insufficient space, please attach a page giving full details as above.*

## 4. Character of Persons and Entity

Please answer the following questions about the partners including any partner company and all of the directors of that company:

	Yes	No
(a) Have any of the partners/directors ever been convicted of, or found guilty of, ANY offences anywhere? (Include all traffic offences that went to court but do not include spent convictions)		
(b) Are any of the partners/directors presently under a probation order, good behaviour bond, on parole, released on licence or subject to periodic detention?		
(c) Are any of the partners/directors aware of any proceedings pending against you/them for an offence, including proceedings by way of appeal or review?		
(d) Have any of the partners/directors ever been disqualified from holding a licence by any occupational licensing Board, agency, other Departments or authorities anywhere?		
(e) Has the firm breached or been found guilty of ANY offences anywhere?		
(f) Has any partner/director been known by any other name?		

*If the answer to any of the above items was 'Yes', full details must be provided on a separate attached sheet of paper.*

## 5. Business and Address Details

Please provide the name of the person that will be in *bona fide* control of the business if one of the licensed partners (specified at section 2) is not undertaking that role:

Person in *bona fide* control:

Triennial certificate No:

RA

Principal Place of Business:

Postal Address:

(If different from above)

Address for the service of notices: (Cannot be a PO Box)

See section 36 of the *Real Estate and Business Agents Act 1978*

Branch Office(s) (if applicable):

See section 37 of the *Real Estate and Business Agents Act 1978*

Name of Branch Manager:

Triennial Certificate No Branch Manager:

RA

Attach additional sheet if necessary

Does the partnership intend to operate under a **franchise agreement**? Yes  No

If you answered **yes**, please provide a copy of the franchise agreement.

## 6. National Police Certificate/s

The *Real Estate and Business Agents Act 1978* requires any applicant applying for a real estate settlement agent and/or business settlement agent licence to be of good character and repute, and a fit and proper person to hold a licence. Please attach to this application **an original or duly certified copy of a National Police Certificate** for each partner of the firm, each director of any company which is partner of the firm, and the person in *bona fide* control which is **no more than three months old**. Original documents will not be returned.

Please see [www.commerce.wa.gov.au/cp/authorisedwitness](http://www.commerce.wa.gov.au/cp/authorisedwitness) for a list of occupations authorised to certify documents. The National Police Certificate can be obtained through participating Australia Post outlets in Western Australia (please see [www.police.wa.gov.au](http://www.police.wa.gov.au) for further information).

## 7. Business References

Two business references for each partner and each director of a corporate member (if applicable) that is not currently licensed under the Act must accompany this application. The references must be in the pro forma (see Appendix 1) – please copy as needed. References from relatives or partners will not be accepted and at least one reference must be from a person external to your current place of employment.

## 8. Financial Information

The Commissioner for Consumer Protection cannot grant a licence unless (s)he is satisfied that the applicant has sufficient material and financial resources available to comply with the requirements of the Act. To facilitate this, each person or corporate member of the partnership is required to complete the following:

Name of Partner:

Confidential Statement of Assets and Liabilities

Assets	\$
Liabilities	\$
Net Worth	\$

Name of Partner:

Confidential Statement of Assets and Liabilities

Assets	\$
Liabilities	\$
Net Worth	\$

Name of Partner:

Confidential Statement of Assets and Liabilities

Assets	\$
Liabilities	\$
Net Worth	\$

*Attach additional sheet if necessary*

**9. Authorisation to obtain information**

In order to assist the Commissioner for Consumer Protection with assessment of this application, we give authorisation to the Commissioner, or persons (s)he directs, to obtain on behalf of those persons listed below copies of:

- (a) current or historical criminal records relating to any offence committed by member of the firm or an associated person/entity;
- (b) any statements of fact for proceedings to which a member of the firm, or an associated person/entity, have been a party;
- (c) any court transcript or records for proceedings to which a member of the firm, or an associated person/entity, have been a party;
- (d) any decision in proceedings before any statutory body to which a member of the firm, or an associated person/entity, have been a party;
- (e) any other document or file relating to another occupational licence which a member of the firm, or an associated person/entity, have applied; and/or
- (f) any other document or file that may be necessary to assist the Commissioner with assessment of this application.

I/We further agree, during the currency of this application, to do all things necessary to assist the Commissioner in obtaining the above records upon request.

By signing this document, I/we confirm that I/we understand fully the duties and obligations imposed on the firm under the *Real Estate and Business Agents Act 1978*, Regulations, and associated Code of Conduct.

***All natural persons involved in the management or conduct of the agency must sign this section to attest to the information provided.***

Name of Person	Signature	Date

**10. Declaration (signed by person in *bona fide* control)**

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I, (print full name)

of (address)

occupation

being the person in *bona fide* control of the firm for a real estate and business agent sincerely declare as follows:

1. no person included in the list of partners of the firm or directors of corporate partners (if applicable) is an undischarged bankrupt or a person whose affairs are being administered under the laws of bankruptcy (if this is not so provide details on a separate sheet of paper);
2. the particulars given in this application are true and correct and the attachments hereto are what they purport to be;
3. I have/ have not (~~delete which is not applicable~~) been appointed as Partner of the business;
4. I shall be in *bona fide* control and exercise constant supervision of all employees, branch managers and sales representatives of the business;
5. I have satisfied myself that each partner named above has sufficient material and financial resources available to it to comply with the requirements of the *Real Estate and Business Agents Act 1978*;
6. The firm is solvent and is able to pay its debts as they fall due for payment.

This declaration is true and I know that it is an offence to make a declaration knowing that it is false in a material particular.

This declaration is made under the *Oaths, Affidavits and Statutory Declarations Act 2005*.

**Declared at (address)**

Dated this  day of  20

Applicant's Signature

**In the presence of:**

Witness' Signature

Print Full Name of Witness

Qualification as such a witness (e.g. JP, Public Servant, etc)

Refer to section 12 and schedule 2 of the *Oaths, Affidavits and Statutory Declarations Act 2005* for the list of Authorised Witnesses or visit [www.commerce.wa.gov.au/CP/authorisedwitness](http://www.commerce.wa.gov.au/CP/authorisedwitness)

**Any person who knowingly makes a statement that is false in a material particular in a statutory declaration is guilty of a crime and is liable to imprisonment for 5 years and a fine of \$24,000.**

## Application Checklist

Prior to submitting the application, please complete this checklist, attaching the supporting documentation in the order set out below.

Prescribed fee (Please complete credit card details below or make a cheque payable to the Commissioner for Consumer Protection)	
An original National Police Certificate for <b>each</b> natural person, director and person in <i>bona fide</i> control (not more than three months old)	
Two references for each partner (or director of a corporate partner) who is not currently licensed under the Act (see Appendix 1 pro forma);	
Copy of franchise agreement (if applicable)	

Your completed application may be forwarded by post to:  Department of Commerce, Consumer Protection Licensing Branch Locked Bag 14, Cloisters Square PERTH WA 6850	Or delivered in person to:  Department of Commerce Ground Floor, Forrest Centre 219 St Georges Terrace PERTH WA 6000
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**An incomplete or inaccurate application cannot be assessed. If you need help completing this form please contact the Licensing Advice Line on 1300 30 40 64.**

## 12. Application Fee

A Triennial Certificate is granted for a three (3) year period. The total fee payable includes a triennial certificate/licence fee, an application fee and a contribution to the fidelity guarantee fund.

A list of current fees is available on our website at [www.commerce.wa.gov.au/CP/licensingfees](http://www.commerce.wa.gov.au/CP/licensingfees).

Cheques should be made payable to the Commissioner for Consumer Protection. For payment by credit card, please complete the details below:

## 13. For Credit Card Payment – applicant to complete

Card Type      Visa       Mastercard

Card Number                          

Expiry Date        /

Card Holder

*Please print*

Signature/Authorisation



**General fitness of individual to be in the management and control of a real estate agency:**

I consider the individual to be a person of good character and repute and persons fit to be concerned as a partner of, or with the management or control of, a real estate agent’s business.

I believe that the individual reasonably understands the duties and obligations imposed on them by the *Real Estate and Business Agents Act 1978*.

I am not aware of any reason why the individual would not be eligible to be, or should not be concerned as a director of, or involved with the management or control of, a real estate agent’s business.

I am not aware of any reason why the applicant may not have sufficient material and financial resources available to comply with the requirements of the *Real Estate and Business Agents Act 1978*.

**Referee’s Name** (please print) .....

**Job title/Place of Employment** .....

**Contact Number** .....

**Declaration**

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I, .....(referee), sincerely declare that the particulars and answers given in respect of this reference are, to the best of my knowledge and belief, complete, correct and true and that the attachments hereto are what they purport to be.

This declaration is true and I know that it is an offence to make a declaration knowing that it is false in a material particular.

This declaration is made under the *Oaths, Affidavits and Statutory Declarations Act 2005*.

**Declared at**

Dated this  day of  20

Referee’s Signature

**In the presence of:**

Witness’ Signature

Print Name of Witness

Qualification as such a witness (e.g. JP, Public Servant, etc.)

Refer to section 12 and schedule 2 of the *Oaths, Affidavits and Statutory Declarations Act 2005* for the list of Authorised witnesses or visit [www.commerce.wa.gov.au/CP/authorisedwitness](http://www.commerce.wa.gov.au/CP/authorisedwitness).

**Any person who knowingly makes a statement that is false in a material particular in a statutory declaration is guilty of a crime and is liable to imprisonment for 5 years.**





**General fitness of individual to be in the management and control of a real estate agency:**

I consider the individual to be a person of good character and repute and persons fit to be concerned as a partner of, or with the management or control of, a real estate agent’s business.

I believe that the individual reasonably understands the duties and obligations imposed on them by the *Real Estate and Business Agents Act 1978*.

I am not aware of any reason why the individual would not be eligible to be, or should not be concerned as a director of, or involved with the management or control of, a real estate agent’s business.

I am not aware of any reason why the applicant may not have sufficient material and financial resources available to comply with the requirements of the *Real Estate and Business Agents Act 1978*.

**Referee’s Name** (please print) .....

**Job title/Place of Employment** .....

**Contact Number** .....

**Declaration**

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I, .....(referee), sincerely declare that the particulars and answers given in respect of this reference are, to the best of my knowledge and belief, complete, correct and true and that the attachments hereto are what they purport to be.

This declaration is true and I know that it is an offence to make a declaration knowing that it is false in a material particular.

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Print Name of Witness

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