Reinstatement of Licence



601-1595 Bedford Highway, Bedford, Nova Scotia, B4A 3Y4

Phone: 902-468-3511 800-390-1015 Fax: 902-468-1016 800-390-1016 Website: nsrec.ns.ca pcrane@nsrec.ns.ca

For use within 30 days of termination ONLY. Reinstatements after 30 days require a new licence application.

NOTE: Applicants for reinstatement must complete any missed Continuing Professional Education courses prior to applying for reinstatement.

Reinstatement of licence fee: \$228.00 tax included. You will be invoiced by email. Log in to the NSREC Licensee Portal to pay your licensing fees.

PART A NATURE OF REINSTATEMENT										
	ect the licence(s) that you wish to reinsta									
	Salesperson	FOR INTERNAL USE								
	Associate Broker	Approved By								
	Managing Associate Broker									
	Broker	Approval Date								
	Brokerage	0 10 15								
	Approved Sales Corporation		Conditions/ Restrictions							
DAE	T D I I IOTNOTE INTODMATION									
PART B LICENSEE INFORMATION										
LAST NAME		FIRST NAME	NICKNAME (m	(may replace your <u>first name only</u> in advertising						
MAILING ADDRESS			SUITE/APT.							
CITY/TOWN		PROVINCE	POSTAL CODI	=						
	ARRESO (REGUIDER)									
EMAIL ADDRESS (REQUIRED)										
Emails are required as the Commission occasionally communicates legislative and bylaw changes to licensees to ensure compliance. In applying for a real estate licence you are consenting to receiving this information.										
BROKERAGE YOU ARE APPLYING TO REPRESENT										
BROKE	BROKERAGE ADDRESS									
BROKERAGE YOU HAVE RECENTLY TERMINATED FROM (WITHIN 30 DAYS)										

PART C LICENSEE QUESTIONNAIRE						
Answer the following questions for the time period since	your last licen	ce application.				
Have you had any license or registration of any kind refused, suspended, or revoked?				Yes		No
If yes, explain:	,					
Will you be employed in any other business, occupation or profession?				Yes		No
If yes, explain:						
Are there currently any unpaid judgments against you or any lawsuits or judgments pending (including Revenue Canada)?			Yes		No	
If yes, explain:						
4. Are you a discharged bankrupt, awaiting discharge	narged bankrupt, awaiting discharge, or presently a party to bankruptcy proceedings?			Yes		No
If yes, explain:						
Have you ever been involved as an officer, director or majority shareholder with a corporation that is bankrupt or presently a party to bankruptcy proceedings?				Yes		No
If yes, explain:						
6. Were you charged with or convicted of any criminal offence or any other offence under the law of any country, province or state (excluding provincial or municipal highway traffic offences resulting in points and/or monetary fines only)? Or disciplined by any professional/ occupational body or society?						No
yes, explain: Were you licensed under a name other than the name in Part B, or taken education courses using a different name?				Yes		No
If yes, explain:						
11 yes, explain						
and answers in the foregoing application are true and co		,			_, 20	
APPLICANT SIGNATURE	_	PRINT NAME				
PART E BROKER AUTHORIZATION						
I, hereby certify that the information given by						
BROKER		APPLICANT			!-	_
in the foregoing application is to the best of my knowled	ge and belief tr	ue. I furtner certify that the applicant, if	grante	ed a lice	ence, is	j
authorized to represent						
upon approval of this application by the Commission.						
AUTHORIZED SIGNATURE		F SIGNING AUTHORITY				
	22 0	 				
PRINT NAME	DATE					