

Michigan Department of Licensing and Regulatory Affairs  
 Bureau of Commercial Services  
 Licensing Division  
 REAL ESTATE  
 P.O. Box 30243, Lansing, MI 48909  
 517-373-7353 Fax: 517-373-1044  
 www.michigan.gov/realestate

## DEPARTMENT USE ONLY

ID # 65-01

Date Approved

Approved By

**EMPLOYING BROKER NOTIFICATION**

AUTHORITY: P.A. 299 of 1980, as amended  
 COMPLETION: Mandatory  
 PENALTY: Failure to complete may result in denial of your application

**INSTRUCTIONS AND INFORMATION**

1. This form may only be used by NEW salesperson applicants who have applied for licensure at the [www.michigan.gov/icola](http://www.michigan.gov/icola) website and did not list a broker when applying, or have changed brokers after applying on iCOLA prior to license exam. This form is required to affiliate with the proper broker. If you do not submit this form your license will remain pending in the database or may be issued to the incorrect broker.
2. Salesperson license applications filed on iCOLA are valid one year from the date of first applying. If application is over one year old; you must re-apply on iCOLA at [www.michigan.gov/iCOLA](http://www.michigan.gov/iCOLA).
3. TYPE OR PRINT CLEARLY IN BLACK INK.
4. Fill out this form, sign it and have your employing broker also sign. Mail the form to the address listed above, or fax to: 517-373-1044. If you are faxing this form, please do not mail the original.

**APPLICANT INFORMATION**

Applicant's Legal Name (First, Middle, Last)

Home Address (Number and Street)

City

State

ZIP

E-mail Address

Daytime Phone Number

Social Security Number

Date of Birth

Date Passed Exam

**EMPLOYING BROKER INFORMATION**Broker Name - as shown on Broker's license. DO NOT USE DBA, Associate Broker or Branch Office.

Broker's License I.D. Number

65-

**AFFILIATION REQUEST (both the applicant and broker must sign)**

We request that the Department issue applicant a real estate salesperson's license. If the license is issued, the broker agrees to exercise careful supervision over the salesperson's real estate activities.

Signature of Salesperson Applicant

Date

Signature of Employing Broker/Associate Broker

Date

Licensed Name of Employing Broker (Please print or type)