



120-DAY RESIDENTIAL LEASING AGENT PERMIT/APPLICATION

ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION

Division of Real Estate
320 West Washington Street, 3rd Floor
Springfield, Illinois 62786
fpr.realestate@illinois.gov

472

120-DAY RESIDENTIAL LEASING AGENT PERMIT/APPLICATION

RESIDENTIAL LEASING AGENT INFORMATION (Note: Must be submitted within 24 hours of employment)

NAME _____ SOC SEC NO. _____

MAILING ADDRESS _____

CITY, COUNTY, STATE, ZIP CODE _____

DATE OF BIRTH _____ TELEPHONE NO. (_ _ _) _ _ - _ _ _

EMAIL ADDRESS: _____

SPONSOR/FIRM INFORMATION

SPONSOR NAME _____ LICENSE NO. _____

D/B/A (IF APPLICABLE) _____

MAILING ADDRESS _____

CITY, STATE, ZIP CODE _____

I/We certify that the Residential Leasing Agent Permit Applicant is at least 18 years of age, has not previously held a Residential Leasing Agent permit or a Residential Leasing Agent license, and has obtained a high school diploma or an equivalent course of study (i.e., GED). I/We further certify that the Residential Leasing Agent Permit Holder shall be subject to the standards of practice and disciplinary provisions of a Residential Leasing Agent licensee, and the Designated Managing Broker shall be responsible for the activities and actions of the Residential Leasing Agent Permit Holder as if the Residential Leasing Agent Permit Holder was a Residential Leasing Agent licensee.

Residential Leasing Agent Permit Holder Signature

Designated Managing Broker Signature

Date

Designated Managing Broker License No.

\$25 Fee Payable to the Illinois Department of Financial and Professional Regulation is required with this Form.