

# You may now pay this fee Online!



Beginning June 5, 2024, this new payment option will be available for Division of Real Estate licensure related fees.

Applicants and licensees may submit one-time payments online in place of sending a check or money order.

To pay online, please visit <https://idfpr.illinois.gov/epay.html>.

Once paid, complete the Payment Method section below and email your application, supporting documents, and this page to [fpr.realestate@illinois.gov](mailto:fpr.realestate@illinois.gov).

Access the  
ePay site via  
QR Code here



**Important:** Please complete the "Payment Method" section below for each application to ensure proper handling:

## Payment Method

\_\_\_ Online – Paid Online at: <https://idfpr.illinois.gov/epay.html> in the amount of \_\_\_\_\_. Approved # \_\_\_\_\_

\_\_\_ Check/Money Order. Check# \_\_\_\_\_

Application Type: "Broker Downgrade"



# Managing Broker to Broker Exchange Application

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Illinois Department of Financial and Professional Regulation  
Division of Real Estate  
PO Box 7570  
Springfield, Illinois 62791-7570  
[FPR.RealEstate@illinois.gov](mailto:FPR.RealEstate@illinois.gov)

## **EXCHANGE INFORMATION:**

1. A managing broker license may exchange to a broker license only if the managing broker license is eligible for renewal. Pending disciplines will be transferred to the new broker license.
2. Upon the exchange of a managing broker license to a broker license, the managing broker license will be canceled. To obtain a managing broker license after downgrading to a broker license, a transferee shall meet the requirements of a new applicant for managing broker as set forth in the Illinois Real Estate License Act and Administrative Rules.
3. Brokers must be sponsored to maintain an active license status. If you are currently a self sponsoring managing broker, you will need to find a new sponsoring broker, complete a Sponsor Card, and pay an additional, non-refundable \$35.00 fee.
4. All licensees required to complete continuing education (“CE”) shall have renewed their managing broker license in the previous renewal period with the required CE.

## **APPLICATION INSTRUCTIONS**

1. Print, complete, and sign page 2 of this document. (If you are changing your sponsoring broker with this application, you must complete a separate Sponsor Card, which requires an additional non-refundable \$35.00 fee.). The Sponsor Card is located on our website: <https://idfpr.illinois.gov/profs/realest.html>
2. Mail or email page 2 to the above address with the non-refundable \$150.00 fee (and any other applicable fees) with a check or money order, made payable to *IDFPR*, or proof of payment via ePay (see attached cover sheet).



# Managing Broker to Broker Exchange Application

Illinois Department of Financial and Professional Regulation Division of Real Estate

PO Box 7570

Springfield, Illinois 62791-7570

[FPR.RealEstate@illinois.gov](mailto:FPR.RealEstate@illinois.gov)

Licensee License Number:	Licensee Social Security Number or ITIN (last 4 digits):
Licensee Name:	Current Sponsoring Broker Name:
Licensee Email:	Current Sponsoring Broker License Number:
<input type="checkbox"/> Check here if change of address and complete below: <i>(If you are changing your sponsoring broker, you must complete a separate Sponsor Card with a \$35.00 fee)</i>	
Licensee Mailing Address (P.O. boxes not accepted):	Licensee City, State, Zip:

**All sections must be completed. Incomplete applications will not be processed.**

1.	Have you ever been denied a professional license, permit, certification or had a professional license, permit, or certification disciplined in any way by any licensing authority? If yes, submit a copy of the denial letter and/or statement of discipline.	<input type="checkbox"/> Yes	<input type="checkbox"/> No						
2.	Are you delinquent on State taxes or child support payments? If yes, submit a statement concerning any payment agreement and an official document from the Illinois Department of Revenue or the Illinois Department of Healthcare and Family Services relating to your agreement.	<input type="checkbox"/> Yes	<input type="checkbox"/> No						
3.	Are you a business owner or an employer and delinquent on workers' compensation obligations as determined by the Illinois Workers' Compensation Commission or the Department of Insurance? If yes, submit a statement concerning any agreement reached and an official document from the Illinois Workers Compensation Commission or the Illinois Department of Insurance relating to your agreement.	<input type="checkbox"/> Yes	<input type="checkbox"/> No						
4.	<p><b>Check only one:</b></p> <input type="checkbox"/> I have an active managing broker license and renewed my managing broker license in the previous renewal period with the required CE. <input type="checkbox"/> I have an active managing broker license and am exempt from the CE requirements in accordance with the Real Estate License Act of 2000 and Rules.								
5.	<p><b>Attestation:</b></p> <p>I understand that if I provide false or fraudulent information my license could be disciplined and/or fined. I have read this application in its entirety and to the best of my knowledge all statements are true, correct, and accurate. <b>I acknowledge that to obtain a managing broker license after transferring to a broker license, I will be required to meet the requirements of a new applicant for managing broker license as set forth in the Real Estate License Act of 2000 and Administrative Rules.</b></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 60%; padding: 5px;">Licensee Signature:</td> <td style="width: 40%; padding: 5px;">Date:</td> </tr> <tr> <td style="padding: 5px;">Designated Managing Broker Printed Name:</td> <td style="padding: 5px;">Designated Managing Broker License Number:</td> </tr> <tr> <td style="padding: 5px;">Designated Managing Broker Signature:</td> <td style="padding: 5px;">Date:</td> </tr> </table>			Licensee Signature:	Date:	Designated Managing Broker Printed Name:	Designated Managing Broker License Number:	Designated Managing Broker Signature:	Date:
Licensee Signature:	Date:								
Designated Managing Broker Printed Name:	Designated Managing Broker License Number:								
Designated Managing Broker Signature:	Date:								

<b>Payment Method</b>	
<input type="checkbox"/> Online – Paid Online at: <a href="https://idfpr.illinois.gov/epay.html">https://idfpr.illinois.gov/epay.html</a> in the amount of _____. Approved # _____	
<input type="checkbox"/> Check/Money Order. Check# _____	Application Type: "Other"