



Department of Commerce

Division of Real Estate & Professional Licensing

John R. Kasich, Governor
Andre T. Porter, Director

77 South High Street, 20th Floor
Columbus, Ohio 43215-6133

Please visit our website at
www.com.ohio.gov/real

614 | 466-4100

Fax: 614 | 644-0584

TTY/TDD: 800 | 750-0750

Renewal Application with Education Compliance Form

Broker Renewal Fee: \$180
Salesperson Renewal Fee: \$135

Online Renewal:

- Go to www.ohio.gov/real
- Click **License Renewal** under Online Services heading
- Click Login link at the top right corner to sign in to our secure site using your User ID and password.
- Click **Create/Resume a Renewal** on the left under **Activities**
- Answer Ethical Conduct and Legal History Questions.
- Pay your renewal fee online using a Visa or Mastercard. **Credit card payments may not be taken over the telephone.**
- Print out receipt page for your records.
- Send a completed Continuing Education Compliance Form, with copies of your education certificates, below by your due date.
- Mail to:** Ohio Division of Real Estate & Professional Licensing
77 S High St. 20th Fl.
Columbus, OH 43215-6133

Note: If Online Renewal is unavailable, it is the licensee's obligation to make certain the renewal is timely filed.

Mail-In Renewal:

- Complete the Renewal Application and the Continuing Education Compliance form.
- Answer the Ethical Conduct and Legal History questions.
- Sign and date the certification on page 1.
- Return the forms, **along with the renewal fee**, to the Division. Make the check or money order payable to The Ohio Division of Real Estate. **Cash will not be accepted.**
- Mail to:** Ohio Division of Real Estate & Professional Licensing
77 S High St., 20th Fl.
Columbus, OH 43215-6133

Renewal Reminders:

- The Renewal Application and Education Compliance Form will not be accepted earlier than 60 days prior to your due date.
- If this is your first birthday since becoming licensed, your renewal is due, however your 30 hours of continuing education are not.

Section 1: Applicant Information

I am renewing my (check one) Broker License (\$180) File Number: _____
 Salesperson License (\$135) File Number: _____

First Name: _____ MI: _____ Last Name: _____ DOB: _____

Home Address: Check if new _____ Home Phone: () _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Section 2: Ethical Conduct and Legal History

- Please attach a complete explanation for any questions answered "yes."
- Questions apply to all professional licenses regardless of profession

Since your most recent filing of an application for Ohio real estate licensure, renewal or transfer/reactivation application, have you:

- Yes No been disciplined in any manner by any public entity or professional or trade association for any violation of any professional licensing law, regulation or ethical rule?
- Yes No been refused or denied any professional license or registration by any public entity?
- Yes No any professional license revoked, suspended or limited in any way for any reason?
- Yes No been notified by any public entity or professional or trade association that you were under investigation for any violation of any professional licensing law, regulation or ethical rule?
- Yes No been the subject of any unsatisfied judgments?
- Yes No been convicted of, plead guilty to or been granted intervention in lieu of conviction for any unlawful conduct excluding minor traffic violations?

Section 3: Applicant Certification

I certify that all of the statements on this application and all of the attached materials are complete and accurate. I understand that any false statement on this form or any attached materials may subject me to criminal prosecution and the loss of my Ohio real estate license.

Signature of Applicant: _____ **Date:** _____

Real Estate Continuing Education Compliance Form

Proof of Continuing Education Compliance may not be submitted earlier than 60 days before the due date.

Each licensee shall submit proof to the superintendent that the licensee has satisfactorily completed thirty (30) hours of continuing education, including the three required courses in **Civil Rights, Core Law, and Canons of Ethics**.

Each licensee who is seventy (70) years of age or older within a continuing education reporting period shall submit proof that the licensee has completed a total of nine (9) hours of continuing education, including the three required courses in **Civil Rights, Core Law, and Canons of Ethics**. A licensee who is seventy (70) years of age or older during the reporting period whose license is in Inactive status is exempt from the continuing education requirements specified in this section.

- Enter your name and file number (license number).
- List each course completed by completed the fields listed below.
- Attach copies of your education certificates
- Continuing Education Course Certificates must be maintained for a period of at least 6 years.
- Carry-Over Hours:
 - List carry-over from your last reporting period, which you are using this reporting period under the **Electives Section**.
 - List hours that you took this reporting period in excess of 30 hours in the **Carry-Over Section, up to 10 hours**.

Full Name:

File Number:

Civil Rights Course (Minimum 3 Hours)

| | | |
|-----------------|---------------------------|-------|
| Course Provider | Ohio Certification Number | Hours |
| Course Title | Date(s) of Attendance | |

Core Law Course (Minimum 3 Hours)

| | | |
|-----------------|---------------------------|-------|
| Course Provider | Ohio Certification Number | Hours |
| Course Title | Date(s) of Attendance | |

Canons of Ethics Course (Minimum 3 Hours)

| | | |
|-----------------|---------------------------|-------|
| Course Provider | Ohio Certification Number | Hours |
| Course Title | Date(s) of Attendance | |

Electives

| | | |
|-----------------|---------------------------|-------|
| Course Provider | Ohio Certification Number | Hours |
| Course Title | Date(s) of Attendance | |

| | | |
|-----------------|---------------------------|-------|
| Course Provider | Ohio Certification Number | Hours |
| Course Title | Date(s) of Attendance | |

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|-----------------|---------------------------|-------|
| Course Provider | Ohio Certification Number | Hours |
| Course Title | Date(s) of Attendance | |

Additional Space Is Provided On The Next Page

| | | |
|-----------------|---------------------------|-------|
| Course Provider | Ohio Certification Number | Hours |
| Course Title | Date(s) of Attendance | |
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TOTAL HOURS FROM PAGES 2 & 3 (MUST be at least 30)
 (Total hours for licensees over 70 years of age must be at least 9)

LIST UP TO TEN HOURS OF CARRY-OVER EDUCATION BELOW. If you did not use all of the hours of the last class listed above to reach the 30 total hours, list that class first here with any of the carry over hours.

| | | |
|-----------------|---------------------------|-------|
| Course Provider | Ohio Certification Number | Hours |
| Course Title | Date(s) of Attendance | |
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Total Number of Carry-Over Hours

NOTICE: This application and the information contained therein, except for the social security number, is public record pursuant to Ohio Revised Code 149.43.
NOTICE: Refusal of check payment by the drawer's bank may result in a \$100 fee to the superintendent or rejection or withdrawal of approval of this application.