



Government of **Western Australia**
 Department of **Commerce**
 Consumer Protection

Application for Renewal of a Real Estate and Business Sales Representative Registration (including Property Managers)

Please use a pen and write neatly using BLOCK LETTERS. Tick where appropriate

Application Requirements

This form must be completed and signed by the applicant, except for section 3.

Your application can not be assessed unless ALL sections are completed and ALL information is provided. It is essential that you DO NOT LEAVE ANY SECTION BLANK – Use 'N/A' or 'Nil' where appropriate.

This application **must** also be accompanied by the prescribed fee and those additional items listed in the Application Checklist at section 10. A receipt is not provided unless specifically requested. **This fee is not refundable.**

An additional 25% of the renewal fee is payable for applications received after the expiry date of the registration. If you are paying by credit card, this fee will be deducted where applicable. For other payment methods, please note that the application will not be considered complete until applicable late fees are paid.

The list of current fees is available on our website at www.commerce.wa.gov.au/CP/licensingfees by following the links.

1. Registration Holder Details

Registration Number: RR

Title: Mr Mrs Miss Ms Other

Last Name:

Given Name(s):

Previous Name(s):

(If applicable)

If you have legally changed your name since the grant of your registration, or since your last renewal (e.g. by marriage, alias, deed poll), you will need to provide supporting evidence confirming the change of name.

Phone: () Work phone: () Mobile:

Preferred Email address:

Residential Address:

Postal Address:
 (If different from above)

Address for Purpose of the Register:
 (See regulation 7(c) of the *Real Estate and Business Agents (General) Regulations 1978*)

Department of Commerce
 Consumer Protection
 Level 2, Gordon Stephenson House
 140 William Street
 PERTH WA 6000

Licensing Branch
 Level 1, Mason Bird Building
 303 Sevenoaks Street
 CANNINGTON WA 6107

Locked Bag 14
 Cloisters Square WA 6850

Licensing Advice Line
 Tel: 1300 30 40 64

Overseas Callers
 +61 8 6251 2931

Email
cplicensing@commerce.wa.gov.au

Web Site
www.commerce.wa.gov.au/cp/licences

A9304748

9. Declaration

I, _____ sincerely declare that the particulars and answers given in respect of this application are, to the best of my knowledge and belief, complete, correct and true and that the attachments hereto are what they purport to be. This declaration is true and I know that it is an offence to make a declaration knowing that it is false in a material particular.

This declaration is made under the *Oaths, Affidavits and Statutory Declarations Act 2005*.

Declared at (address) _____

Dated this _____ day of _____ 20 _____

Applicant's Signature _____

In the presence of [refer to [Section 12](#) and schedule 2 of the *Oaths, Affidavits and Statutory Declarations Act 2005* for list of Authorised Persons]:

Witness' Signature _____

Print Name of Witness _____

Qualification as such a witness (e.g. JP, Public Servant, etc) _____

Any person who knowingly makes a statement that is false in a material particular in a statutory declaration is guilty of a crime and is liable to imprisonment for 5 years and a fine of \$24,000.

10. Application Checklist

Prior to submitting your application, please complete this checklist, attaching your supporting documentation in the order set out below.

Prescribed renewal fee. This fee is not refundable. (Please complete the credit card details below or make cheques payable to the Commissioner for Consumer Protection);	
Late fee (if applicable). This fee is not refundable.	
An original or certified copy of an Australian police check (not more than three months old)	
Proof of change of name (if applicable)	

If you have any convictions within the past three years, please also provide:

A written explanation of the circumstances surrounding your conviction(s)	
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You may lodge your completed application:

By post addressed to:

Consumer Protection Licensing
Department of Commerce
Locked Bag 14
CLOISTERS SQUARE WA 6850

In person at:

Department of Commerce
Level 2, Gordon Stephenson House
140 William Street
PERTH

In person at:

Consumer Protection Licensing
Level 1, Mason Bird Building
303 Sevenoaks Street
CANNINGTON

DROP OFF ONLY

An incomplete or inaccurate application cannot be assessed. If you need help completing this form please contact the Licensing Advice Line on 1300 30 40 64.

11. For Credit Card Payment – applicant to complete

A list of current fees is available from our website via www.commerce.wa.gov.au/CP/licensingfees.

Card Type Visa Mastercard

Card Number

Expiry Date /

Card Holder _____

Please print

Signature/Authorisation _____

Amount \$ _____