

CERTIFICATION DEPARTMENT

APPLICATION FOR ISSUANCE OF A LICENCEReal Estate Agency – Natural person

IMPORTANT

A licence application is deemed received once all information and documents required hereunder have been provided and the applicable fees have been paid.

Mr. Mrs.	Licenc	e num	ber:				
ame at birth:							
ST NAME FIRST NAME							
ther names (If you want your licence to also show a name other than your birth name)							
sual name:							
ST NAME FIRST NAME							
ote: You must provide a sworn statement to the effect that this usual name is the one you are known by other supporting document to the Organization's satisfaction. usband's name (If you are a woman married before April 2, 1981, you may use your husband's name)	•						
ere divorced or widowed after this date.)							
T NAME FIRST NAME							
ote: You must provide a copy of a document stating the name of your husband and the date of your marriag certificate or marriage contract.	ge, such	as you	r mari	riage	e lice	nce,	marria
me under which the agency intends to do business:							
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this name part of a franchise network? Yes No			<u> </u>				
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the ACAIQ, indicate the number of this licence or certificate:

SECTION III - CORRESPONDENCE PREFERENCES Language of correspondence: French English Address of correspondence: The OACIQ favors electronic communications to circulate information to candidates and licence holders (notably through e-mail, synbad.com and PRO@CTIVE). Printed correspondence will be mailed to your establishment by default. If you prefer to use another address, please indicate it below. Note that you may change your preferred address of correspondence at any time by accessing My record on synbad.com or by contacting the Certification Department using the contact information below. Home address Other Address: MUNICIPALITY **SECTION IV - DECLARATIONS** You must provide the information and documents that are requested, unless you have already submitted them to the OACIQ. Where necessary, you may attach a sheet to complete your answers. Any false declaration will result in the revocation of your licence. Note that you are responsible for the answers in this section even though it was completed by another person. Since your last licence issuance application or information update, or if you have never disclosed the information before: 1. Are you or have you been registered with a body, in another province or State (international), responsible for overseeing and monitoring real estate brokerage? Yes If yes, please provide the following information: a) Name of body __ ____ c) Province/State ____ _____ d) Member Number _ If you answered yes to question 1, has this licence or certificate ever been revoked, suspended or made subject to restrictions or conditions by this body? Yes No If yes, please provide the decision or judgement. Have you ever declared bankruptcy, i.e. have you ever made an assignment of property or been placed under a receiving order pursuant to the Bankruptcy and Insolvency Act? If this condition has already been reported in previous years, please answer No, otherwise you must answer Yes. Yes

If yes, please complete and send the Form to be completed in case of bankruptcy, available on the OACIQ's website, along with the required documents.

SECTION IV – DECLARATIONS (continued)

4.	Regardless of the time period elapsed since your conviction, have you ever pleaded guilty to, or been found guilty by a court, in Canada or
	elsewhere, of a criminal offence? (Please note that you are required to declare any guilty plea regardless of its nature or relation (perceived
	or not) to the real estate brokerage field)

Yes No

If yes, please complete and send us the Form to be completed in case of conviction, available on the OACIQ's website, along with the following documents:

- a) Information (Indictment)
- b) Written judgement or, if it is not available, record of proceedings of guilt and sentence
- c) Audio recordings of hearing on guilt and sentence, if the conviction is less than 10 years
- d) Pre-sentencing report, if available
- 5. Except for a violation to the *Highway Safety Code* and municipal by-laws, have you pleaded guilty to, or found guilty by a court, in Canada or elsewhere, of a penal offence pursuant to a provincial or a federal law or any other applicable legislation?

Yes No

If yes, please complete and send us the Form to be completed in case of conviction, available on the OACIQ's website, along with the following documents:

- a) Statement of offence or indictment
- b) Written judgement or, if it is not available, record of proceedings of guilt and sentence
- c) Audio recordings of hearing on guilt and sentence, if the conviction is less than 10 years
- 6. Are you a member of an order, body, corporation or professional association from sectors other than real estate brokerage?

Yes No

7. Have you been the subject of a claim with the Indemnity Fund of this order, body, corporation or professional association?

Yes No

8. Have you ever pleaded guilty to, or been found guilty, by a court, of an ethical offence at this order, body, corporation or professional association?

Oui No

If yes, please complete and send the Form to be completed in case of conviction, available on the OACIQ's website, along with any available document.

9. Have you been declared unfit or in loss of autonomy and, by a court decision, placed under a protective supervision (guardianship, curatorship or advisership)?

Yes No

If yes, please provide the supporting judgement.

10. Do you carry out any other paid professional activities in addition to your real estate brokerage activities?

Yes No

11. Apart from your real estate brokerage activities, do you operate or control a company or are you a majority shareholder?

Yes No

12. Are you member of a board of directors or a disciplinary or statutory committee (other than those of the OACIQ)?

Yes No

SECTION IV – DECLARATIONS (continued)

13. Have you ever filed an application to obtain an advance opinion from the Decision Committee on Criminal Offences or from the Licence Issue and Maintenance Committee?

Yes No

14. Have you ever been subject of a decision by the Decision Committee on Criminal Offences or by the Licence Issue and Maintenance Committee in the past?

Yes No

SECTION V - DOCUMENTS TO BE PROVIDED

(You must provide the requested documents, unless you have already submitted them to the OACIQ.)

REGISTRATION

Please provide a statement showing up-to-date information as published in the Register of sole proprietorships, partnerships and legal persons (Registraire des entreprises du Québec), if you use an assumed name other than your birth name.

SECTION VI – FORMER AGENCY WHOSE LICENCE HAS BEEN REVOKED FOR LESS THAN 12 MONTHS

If your agency name is registered in the Registraire des entreprises du Québec, have you made any changes to this name of which you have not informed the Certification Department?

Yes No

If you are a former OACIQ licence holder and your licence has been revoked following, for example, the non-payment of the annual licence maintenance fees, please answer the following questions:

a) Did you have any brokerage contracts in progress when your agency licence was revoked?

Yes No

If you answered yes:

Do you certify that you and your brokers have immediately notified in writing the parties represented by you or one of your brokers that you were no longer authorized to act on your respective behalf and that your brokerage contracts were terminated automatically due to the cessation of agency activities? Read *this article* for more details.

Yes No

Sending notices to your clients is a mandatory condition for the issuance of your licence.

b) Have you, your agency or one of your brokers suspended due to the cessation of the agency's activities carried out real estate brokerage activities during the agency licence revocation period? Read *this article* for more details.

Yes No

Names of brokers who carried out brokerage activities during the agency licence revocation period (add a page as an annex if necessary):

NAME		LICENCE NUMBER
NAME		LICENCE NUMBER
NAME		LICENCE NUMBER
NAME		LICENCE NUMBER
NAME		LICENCE NUMBER
NAME		LICENCE NUMBER

SECTION VII – CONSENT, DECLARATION AND SIGNATURE

■ CONSENT TO THE COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION

The OACIQ protects the privacy of information it collects in accordance with the applicable legislation and its personal information governance policies. The OACIQ collects your personal information via this form. This information is necessary and it will be used for the following purposes:

- · Verification of your identity.
- Processing of your application for OACIQ licence issuance to ensure that your application meets the conditions set forth in the regulations.
- · Payment of your licence issuance application fee.
- Criminal record check.
- Keeping of the OACIQ Register of licence holders.

Where applicable, your personal information may be used to oversee your practice by OACIQ staff members or committee members whose duties so require.

To check your criminal record, the OACIQ may disclose your personal information to companies specialized in background checks.

The payment information collected via this form is destroyed once the processing of your application is completed.

In some cases prescribed by law, your personal information may be used for purposes other than those described above or disclosed to third parties without your consent.

Right of access and correction

Subject to certain reservations, the law authorizes you to access your personal information. You may request corrections to your personal information held by the OACIQ if it is inaccurate, incomplete or equivocal, or if the collection, release or keeping of the information is not authorized by law.

Consequences of refusal

This collection of your personal information is necessary to process your application. In the event that you withdraw your consent to the collection, use or disclosure of your personal information, the OACIQ will not be able to receive or process your application.

Consent

I CONFIRM that I have read and understood the information regarding the collection, use and disclosure of my personal information. I consent to the collection, use and disclosure of my personal information.

I DECLARE that all the information contained in this form is accurate and I understand that any misrepresentation will result in the revocation of my licence. I authorize third parties to disclose to the OACIQ, and to any person it may mandate, personal information regarding my criminal record. I undertake to notify the OACIQ immediately of any change to this information.

X
SIGNATURE

Date: DAY MONTH YEARS

Please sign the form AFTER completing ALL the sections.

SECTION VIII - AUTHORIZATION TO DISCLOSE (OPTIONAL)

COMMERCIAL OR PHILANTHROPIC PROSPECTION

I authorize the OACIQ to disclose the following information to companies or individuals who will use it for commercial or philanthropic prospection purposes: my name and, if applicable, my common name; my licence number; the fact that I hold a real estate broker's licence; the titles I may use; the corporate name or assumed name of the agency on whose behalf I will carry out my activities; the address and phone number of my establishment; and my email address.

REGISTER OF LICENCE HOLDERS

I authorize the OACIQ to publish my email and website addresses in the Register of licence holders.

You may at any time withdraw (or give) your consent to disclose information for commercial or philanthropic prospection purposes or to publish your email/website address in the Register of licence holders. To do so, go to **My record** on synbad.com or contact the Certification Department whose contact information is indicated on this form.

SECTION IX – PAYMENT OF FEES

Please fill out the payment form.

To determine applicable fees, please visit the OACIQ's website at **synbad.com/fees**.

	OUE (including tax	es): \$, File or licence number: (IF APPLICABLE)
IETHOD	OF PAYMENT	
CREDIT	CARD or C	HEQUE OR MONEY ORDER (to the order of OACIQ)
Visa MasterCard	MasterCard	CARD NUMBER —
VISA	mastercard	The CVV/CVC is a three-digit code located on the back of your credit card. EXPIRATION (MM/YY) CVV/CVC
ame of ca	rdholder (if differe	nt from applicant)
X		

PLEASE SEND YOUR PAYMENT AND DOCUMENTS TO

the Certification Department by email at CERTIFICATION@OACIQ.COM, by mail or by fax to any of the contact information indicated below.

Organisme d'autoréglementation du courtage immobilier du Québec

4905 Lapinière Blvd., Suite 2200, Brossard (Québec) J4Z 0G2

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