



**IREC use only**

License #: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Approved: \_\_\_\_\_

# LIMITED LIABILITY PARTNERSHIP LICENSE APPLICATION

**\$50** **\$50**

**INSTRUCTIONS:** Submit this original, completed application form with the required fee and ALL attachments. Applications that are illegible, incomplete, or missing the fee or required attachments will be immediately returned without processing.

**Applications that are faxed/emailed cannot be accepted.**

Your company is not licensed until IREC **approves** the license application. It is unlawful for your company to engage in the business or act in the capacity of a real estate licensee in Idaho without first obtaining a license. Allow 10 business days to process the completed application.

**NOTE: Applications are processed in the order received. Updates on the status of license applications will NOT be given over the phone. When your company and license number appear on active status in the Public Database Search on the IREC website, the license has been approved.**

## 1. LIMITED LIABILITY PARTNERSHIP INFORMATION

Name of Limited Liability Partnership: \_\_\_\_\_

Doing Business As (DBA) name, if any: \_\_\_\_\_  
*(the DBA name must be registered with the Idaho Secretary of State)*

Physical address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing address (if different from above): \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business phone (required): \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

## 2. DESIGNATED BROKER: Every limited liability partnership shall designate and appoint a general partner to be the Designated Broker (DB) for the limited liability partnership.

a. Proposed DB: \_\_\_\_\_  
Name LLP Title

b. Does the proposed DB already have an Idaho broker license?

No - **Attach a completed broker license application for the proposed DB**

Yes - Provide Idaho Broker license number \_\_\_\_\_

**I have completed the Idaho Business Conduct & Office Operations\* or Brokerage Management\* course within the 3 years immediately preceding the date of this application (inactive to active DB or AB to DB applicants only). \*Attach a copy of the completion certificate.**

## 3. Will this company replace an existing company?

No

Yes - I acknowledge IREC will terminate the existing company named below:

Name of Company: \_\_\_\_\_ Lic. #: \_\_\_\_\_

**4. ERRORS & OMISSIONS INSURANCE:** (*E&O insurance must have an effective date on or before the date you submit your application*)

Rice Insurance Services Company (*Commission group policy - attach copies of separate RISC certificates of coverage - 1 for the DB and 1 for the LLP*) - **OR**

Independent Coverage (*attach completed, signed Certification of E&O Coverage form(s) (REE-141 and/or REE-142) showing coverage for both the DB and the Limited Liability Partnership*)

## REQUIRED ATTACHMENTS

*IREC use  
ONLY*

_____ \$50 license fee (check or credit card authorization form) .....	
_____ List of partners (names, titles and addresses of <u>all</u> partners of the partnership).....	
_____ Limited Liability Partnership Registration (attach the file-stamped copy of either the <i>Statement of Qualification of Limited Liability Partnership</i> or <i>Statement of Foreign Qualification</i> (if a foreign limited liability partnership) issued by the Idaho Secretary of State).....	
_____ DBA Registration (if applicable, attach a file-stamped copy of a <i>Certificate of Assumed Business Name</i> issued by the Idaho Secretary of State).....	
_____ Limited Liability Partnership Agreement stating that the proposed DB has full authority to act on behalf of the company, is a general partner, and has been named the Designated Broker for the company.....	
_____ Trust Account Notification Form (REE-088) .....	
_____ E&O Insurance Certification of Coverage form for both the DB and the company (REE-141/REE-142).....	
_____ Broker License Application for proposed DB (if not already licensed as an Idaho broker).....	
_____ I have completed the BCOO or Brokerage Management course within the previous 3 years (inactive to active DB or AB to DB applicants only).....	

\_\_\_\_\_  
Proposed Designated Broker (*signature*)

## NOTARY IS REQUIRED

State of \_\_\_\_\_ )  
County of \_\_\_\_\_ ) ss.

I, \_\_\_\_\_, a notary public, do hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, \_\_\_\_\_ personally appeared before me who, being by me first duly sworn, declared that he/she is the proposed designated broker and a general partner of the \_\_\_\_\_ limited liability partnership, that he/she signed the foregoing document on behalf of the limited liability partnership, and that the statements therein contained are true.

*notary seal*

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
My Commission Expires

*NOTICE: Because of rising costs associated with issuing a refund, it is the policy of IREC to refund overpayments of under \$25 only if requested in writing within 30 days of IREC receipt of the overpayment. Overpayments of \$25 or more will be automatically refunded. There is a \$20 fee assessed for each check returned to IREC for insufficient funds.*