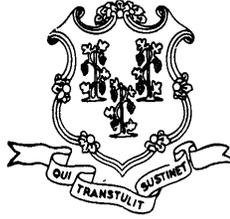


STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
 License Services Division
 165 Capitol Avenue
 Hartford, CT 06106
 Email: XWVbgyfjWg@ct.gov
 Web site: www.ct.gov/dcp



Real Estate License History/Letter of Good Standing Request Form

A \$25.00 fee for each request must accompany the completed application. Please make checks or money orders payable to "Treasurer, State of Connecticut" and return to the above address.

I am requesting a License History/Letter of Good Standing on the following licensee:

Check (✓) applicable license type:			
<input type="checkbox"/> Salesperson	<input type="checkbox"/> Broker (Individual)	<input type="checkbox"/> Broker (Legal Entity)	<input type="checkbox"/> Appraiser

CT Real Estate License Number	<input type="checkbox"/> Active License <input type="checkbox"/> Lapsed or Expired License	Expiration Date of License
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Name of Licensee			

Street Address	City	State	Zip Code

Telephone Number (with area code)	Email Address

Indicate the Number of License History/Letter of Good Standing Requested
<input style="width: 50px; height: 30px;" type="text"/> Number Requested x \$25.00 each

Name and Address where document(s) should be mailed (if different than above)

<i>Signature</i> _____	<i>Date</i> _____
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