



Application for a Real Estate Settlement Agents Licence and/or Business Settlement Agents Licence and Triennial Certificate (Firm/Partnership)

CHECK LIST

Your application can only be processed if **ALL** of the relevant information and supporting documentation is provided. Use this checklist to ensure that you complete all parts of your application and have all necessary supporting documents ready to attach. Please check that:

<ul style="list-style-type: none"> all sections of this form are complete;
<ul style="list-style-type: none"> the two business references for each relevant person have been completed using the pro forma available on the website, and are ready to attach;
<ul style="list-style-type: none"> the Australian police check/s for each relevant person from an approved provider is/are ready to attach;
<ul style="list-style-type: none"> a copy of the Certificate of Insurance is ready to attach;
<ul style="list-style-type: none"> payment of the prescribed fee is ready to be made.

DURATION OF LICENCE

If granted, your Real Estate Settlement Agents and/or Business Settlement Agents Triennial Certificate will be issued for a period of up to three (3) years.

APPLICATION FEE

A fee is payable at the time of lodging the application. Please refer to our website at www.commerce.wa.gov.au/CP/licensingfees for the current prescribed fees. The total fee payable includes a non-refundable triennial certificate/licence fee and a contribution to the fidelity guarantee account. All fees are exempt from the GST and subject to change without notice. Part payment cannot be accepted. Cheques should be made payable to the Commissioner for Consumer Protection.

If you are submitting this form online, you will be able to make payment using the Department's secure payment gateway.

If you are submitting this form by post and are making payment by credit card, you must also complete the Application Payment Form available at www.commerce.wa.gov.au/publications/licensing-application-payment-form and attach it to your application.

LODGEMENT OPTIONS

You may lodge your completed application [ONLINE](#) or:

By post addressed to:

Licensing Services

Department of Mines, Industry Regulation and Safety
Locked Bag 100,
EAST PERTH WA 6892

Licensing Advice Line: 1300 304 064
Overseas Callers: +61 8 6251 2931
General Enquiries: 1300 304 054

In person at:

Customer Service

Level 1, Mason Bird Building, 303 Sevenoaks Street
CANNINGTON
Hours: 8:30am to 4:30pm, Monday to Friday

Email: cplicensing@dmirs.wa.gov.au
Web Site: www.commerce.wa.gov.au/CP/licences

OFFICE USE ONLY

Total Fee:	\$	Department Code	SA <input type="checkbox"/>	Chart Description	<input type="checkbox"/> FRE Agents Fidelity Contribution; and
Chart Key	<input checked="" type="checkbox"/> P		SB <input type="checkbox"/>		<input type="checkbox"/> New app – Settlement Agents Partnership

GENERAL INFORMATION

In this form reference to “**the Act**” means the *Settlement Agents Act 1981* and “**the Commissioner**” means the Commissioner for Consumer Protection.

“**Relevant Persons**” means each person comprising the partnership and, where a partner is a company, all directors and any other natural persons involved in the management or control of that company. This includes the person who is to be in *bona fide* control of the business.

1. Licence category

Which settlement agent’s licence(s) are you applying for?

Real Estate Settlement Agent

Business Settlement Agent

2. Details of applicant

Name of firm:

Include names of each partner

ABN: (if applicable)

Business Name under which the firm intends to trade: (if applicable)

NOTE: Every applicant who intends to carry on business under a business name must have that business name registered under the *Business Names Registration Act 2011* with the Australian Securities and Investment Commission. For information about business names registration requirements visit www.asic.gov.au.

Email address:

Business/ Mobile Number:

We use email and SMS for contact purposes and to send courtesy renewal reminders, so it is important that you notify the Commissioner should your electronic contact details change.

3. Members of the Firm (Partnership)

Please note that where there are up to three (3) partners, at least one of them must be a licensed real estate settlement agent and/or business settlement agent. For a firm with four (4) or more partners, at least two (2) of them must be licensed real estate settlement agents and/or business settlement agents.

Please include in the space below details of all members of the firm. Please indicate by placing a next to the name of those members holding a real estate settlement agent and/or business settlement agent licence. Additionally, place an asterisk (*) next to the name of the licensed member who is to be the person in bona fide control (if applicable).

Name of Partner	Address	Date of Birth /Registration	Email address	* <input checked="" type="checkbox"/>

If there is insufficient space, please attach a page giving full details as above.

4. Company Directors

Please include in the space below details of all directors of any body corporate listed as a partner.

Company Name	Directors	Home address	Date of Birth	Email address

If there is insufficient space, please attach a page giving full details as above.

5. Business References

Each relevant person (partner and/or director, including the nominated person in *bona fide* control) must provide two business references using the pro forma titled "Settlement Agent Business Reference Template for Directors or Partners" which is available on our website at: www.commerce.wa.gov.au/publications/settlement-agent-licence-application-forms.

6. Fitness and character of applicant and relevant persons

Each relevant person (partner and/or director, including the nominated person in *bona fide* control) must provide an Australian police check in their full legal name that is less than three (3) months old. Further information about accepted police checks is available on our website: www.commerce.wa.gov.au/CP/policechecks.

Please answer either 'Yes' or 'No' to each of the following questions. If the answer to any of the questions is 'Yes', you may be contacted to provide additional information as part of the application process.

Has/is the applicant or any relevant person of the applicant:	Yes or No
(a) been convicted, or found guilty of any offences, including convictions which resulted in a suspended sentence? (Include all offences which went to Court, including traffic offences. Do not include spent convictions.)	
(b) aware of any legal proceedings currently pending against you for an offence, including proceedings by way of appeal or review?	
(c) been the subject of any adverse finding by a Government Board, Tribunal or Agency, e.g. the Corruption and Crime Commission?	
(d) had any occupational licence or application refused, cancelled or suspended?	
(e) been disqualified from holding any occupational licence?	
(f) been subject to any disciplinary action by a licensing authority?	
(g) had any investigations or legal proceedings commenced against you or an associated entity, which may result in action being taken in relation to an occupational licence currently held?	
(h) in liquidation, under official management or an undischarged bankrupt?	
(i) having affairs administered under any bankruptcy laws?	
(j) a director of a corporation, which has been subject to any form of insolvency administration?	

7. Business and Address Details

Person in Bona Fide Control

Please state the name of the person that will be in *bona fide* control of the business if one of the licensed directors (specified at section 3) is not undertaking that role.

Person in *bona fide* control:

Triennial Certificate No:

SA/SB

Principal Place of Business:

Postal Address:

(If different from above)

Address for service of notices:

(Cannot be a PO Box)

See section 37 of the Act

Branch Address (if applicable):

See section 38 of the Act

Name of Branch Manager:

Triennial Certificate No of Branch Manager: SA/SB

Attach additional sheet if necessary

8. Financial Information

The Commissioner cannot grant a licence and triennial certificate unless satisfied that the applicant has sufficient material and financial resources available to comply with the requirements of the Act. To facilitate this, credit history checks will be obtained as part of the application process. Each partner must also provide their/its assets and liabilities below.

Name of Partner:

Confidential Statement of Assets and Liabilities

Assets	\$
Liabilities	\$
Net Worth	\$

In addition to completing the above, please answer the following question:

Yes	No

Do you believe that you have sufficient financial resources to enable you to carry on the business as an agent and to comply with the requirements of the Act?

Name of Partner:

Confidential Statement of Assets and Liabilities

Assets	\$
Liabilities	\$
Net Worth	\$

In addition to completing the above, please answer the following question:

Yes	No

Do you believe that you have sufficient financial resources to enable you to carry on the business as an agent and to comply with the requirements of the Act?

Name of Partner:

Confidential Statement of Assets and Liabilities

Assets	\$
Liabilities	\$
Net Worth	\$

In addition to completing the above, please answer the following question:

Yes	No

Do you believe that you have sufficient financial resources to enable you to carry on the business as an agent and to comply with the requirements of the Act?

Attach additional sheet if necessary

Fidelity and Professional Indemnity Insurance

In accordance with section 35 of the Act each triennial certificate holder must enter into a professional indemnity policy under the Commissioner’s Master Policy Agreement. Please provide a **copy of the certificate of insurance**.

For information about obtaining insurance under the Master Policy Agreement, contact Paulene Plichota on (08) 9426 0451 or visit www.marsh.com.au/au/home.html.

9. Authorisation and Declaration - this section must be completed by ALL relevant persons

In order to assist with the determination of this application, I authorise the Commissioner, or persons so directed, to obtain on my behalf any document, record, file or information that may be necessary and relevant to consider my character and repute, and my fitness to be concerned as a director of, or in the management and control of, an agent’s business. This includes but is not limited to records relating to my criminal history or current/previous occupational licences or other relevant information.

I confirm that I understand fully the duties and obligations imposed on the firm under the Act, Regulations, and associated Code of Conduct.

I understand that providing false or misleading information to the Commissioner or Chief Executive Officer is an offence under section 111A of the Act.

Name of Person	Signature	Date

Attach additional sheet if required