



# 45-DAY PERMIT SPONSOR CARD

ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION  
Division of Professional Regulation/Real Estate Professions Section  
320 West Washington Street, 3<sup>rd</sup> Floor  
Springfield, Illinois 62786  
Real Estate Licensing 217/782-3414

## 45-DAY PERMIT SPONSOR CARD

- If you will be self-sponsored you must complete the 45-day permit on your own behalf.
- This form is required to be completed in order to apply for licensure as a Salesperson, Broker, Managing Broker, or Leasing Agent.
- You must include original terminated license or an affidavit explaining why the original license is not available.
- This form is also required to change your Sponsoring Broker. When changing your Sponsoring Broker, there is a \$25 fee. Payment must be in the form of a check or money order made payable to IDFP.

### EMPLOYEE INFORMATION

(Note: Must be submitted within 24 hours of Issuance)

CURRENT DATE \_\_\_\_\_

LICENSE NO. \_\_\_\_\_

NAME \_\_\_\_\_

SOC SEC NO. \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY, COUNTY, STATE, ZIP CODE \_\_\_\_\_

TELEPHONE NUMBER ( \_ \_ \_ ) \_ \_ \_ - \_ \_ \_ \_

GENDER \_\_\_\_\_

MANAGING BROKER  BROKER  SALESPERSON  LEASING AGENT

### SPONSOR/FIRM INFORMATION

SPONSOR NAME \_\_\_\_\_ LICENSE NO. \_\_\_\_\_

D/B/A (IF APPLICABLE) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY, STATE, ZIP CODE \_\_\_\_\_

TELEPHONE NUMBER ( \_ \_ \_ ) \_ \_ \_ - \_ \_ \_ \_

BY \_\_\_\_\_ LICENSE NO. \_\_\_\_\_

**MANAGING BROKER SIGNATURE**

Retain two copies, one for the sponsor and one for the employee.  
If you have any questions, please contact our office.

Return Original to the address at the top of this form.