



CERTIFICATION DEPARTMENT

LICENCE APPLICATION FOR THE MAINTENANCE OF ACQUIRED RIGHTS

IMPORTANT

This form is for individuals whose licence has been revoked but who wish to maintain their acquired rights should they return to the practice in the future. During the acquired rights maintenance period, these individuals **may not engage in any brokerage activity**.

The acquired rights consist in the possibility of obtaining a same-category licence **without having to successfully complete a recognized basic training program and a certification examination of the Organisme d'autoréglementation du courtage immobilier du Québec (OACIQ)**. To obtain a licence without meeting these conditions, an individual must apply for a licence **within 12 months following the licence revocation**. In addition, to obtain a licence, the applicant must meet the mandatory continuing education requirements. For more details, read the article ***Maintaining your acquired rights*** on synbad.com.

Under section 1 of the *Regulation respecting the issue of broker's and agency licences*, if a person loses his acquired rights and wishes to reapply for a licence, he must first show that he has successfully completed one of the basic training programs recognized by the OACIQ and passed an OACIQ certification exam before he can apply for a licence.

SECTION I – IDENTIFICATION

Mr. Mrs.

Licence Number or file Number:

Name at birth:

LAST NAME

FIRST NAME

Date of birth:

DAY

MONTH

YEAR

Home address:

NUMBER

STREET

APARTMENT

MUNICIPALITY

PROVINCE

POSTAL CODE

AREA CODE

TELEPHONE NUMBER (HOME)

AREA CODE

TELEPHONE NUMBER (CELL)

Electronic addresses: _____

SECTION II – ACQUIRED RIGHTS MAINTENANCE

I wish to maintain my acquired rights for my real estate broker's licence for the following 12-month period:

From May 1, 2024 to April 30, 2025

From to

DAY

MONTH

YEAR

to

DAY

MONTH

YEAR

SECTION III – CONSENT, DECLARATION AND SIGNATURE

I 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 licence application for the maintenance of acquired rights to ensure that your application meets the conditions set forth in the regulations.
- Payment of your application fee.
- 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.

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 also DECLARE that I wish to maintain my acquired rights for a period of twelve (12) months. I understand that I may not engage in brokerage activities during this period. **I undertake to notify the OACIQ immediately of any change to this information.**

X

SIGNATURE

Date :

DAY	MONTH	YEAR							

**Please sign the form AFTER
completing ALL the sections.**

SECTION IV – PAYMENT OF FEES

Please fill out the payment form.

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

AMOUNT DUE (including taxes): \$,

File or licence number:
(IF APPLICABLE)

METHOD OF PAYMENT

CREDIT CARD or CHEQUE OR MONEY ORDER (to the order of OACIQ)

Visa

MasterCard



- - -

CARD NUMBER

EXPIRATION (MM/YY)

cvv/cvc

The CVV/CVC is a three-digit code located on the back of your credit card.

Name of cardholder (if different from applicant)

X

CARDHOLDER'S SIGNATURE

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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