

**State of Florida  
Department of Business and Professional Regulation  
Florida Real Estate Commission  
Multiple Permit Request for Instructor  
Form # DBPR RE 14**

**TRANSACTION CHECKLIST - IMPORTANT - Submit all items on the checklist below with your form to ensure faster processing.**

<p><b>ALL License Applicants must submit:</b></p> <ul style="list-style-type: none"><li><input type="checkbox"/> Completed application.</li><li><input type="checkbox"/> Fees:<ul style="list-style-type: none"><li>• \$69.00 for each permit requested.</li><li>• Make check payable to the Florida Department of Business and Professional Regulation.</li></ul></li></ul>
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**Please mail your completed form, documentation and required fee(s) to:**

Department of Business and Professional Regulation  
2601 Blair Stone Road  
Tallahassee, FL 32399-0783

**State of Florida**  
**Department of Business and Professional Regulation**  
**Florida Real Estate Commission**  
**Multiple Permit Request for Instructor**  
**Form # DBPR RE 14**

Check the box for the relevant transaction in Section I and complete the additional sections. If you have any questions or need assistance in completing this form, please contact the Department of Business and Professional Regulation, Customer Contact Center, at **850.487.1395**.

**For additional information see Instructions at the end of this form.**

**Section I – Transaction Types**

TRANSACTION TYPES
<input type="checkbox"/> <b>Request Multiple Permit</b> <input type="checkbox"/> <b>Multiple Permit – Instructor – Fee \$69.00</b> [2505/1060]

**Section II — Request for Multiple Permits**

Last/Surname	First	Middle	Suffix
Permit Number of applicant :			
MAILING ADDRESS			
Street Address or P.O. Box			
City		State	Zip Code (+4 optional)
County (if Florida address)		Country	
CONTACT INFORMATION			
Primary Phone Number		Primary E-Mail Address	

**Section III – School Information (School for which new permit is requested)**

Name of school:			
School permit Number:			
Last/Surname (School permit holder)	First	Middle	Suffix
SCHOOL LOCATION ADDRESS			
Street Address			
City		State	Zip Code (+4 optional)
County (if Florida address)		Country	
CONTACT INFORMATION			
Primary Phone Number		Primary E-Mail Address	
ADDITIONAL CONTACT INFORMATION (OPTIONAL)			
Alternate Phone Number		Fax Number	

**Section IV – Affirmation By Written Declaration****AFFIRMATION BY WRITTEN DECLARATION**

I certify that I am empowered to execute this application as required by Section 559.79, Florida Statutes. I understand that my signature on this written declaration has the same legal effect as an oath or affirmation. Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. **I understand that falsification of any material information on this application may result in criminal penalty or administrative action, including a fine, suspension or revocation of the license.**

Signature of school permit holder:

Date:

Print Name:

**Instructions and Additional Information**

If you have any questions or need assistance in completing this form, please contact the Department of Business and Professional Regulation, Customer Contact Center, at 850.487.1395.

**1. Application Instructions (by section)****a) Section I – Transaction Types**

- b) Select only one transaction type.
- c) **Note:** If requesting a multiple permit for more than one school, there is a fee of \$69.00 for each permit requested.

**2. Section II – Request for Multiple Permits**

- a) Fill out each section completely.
- b) In the Name section, applicants must use the name as it appears on the instructor's Social Security card. Do not use any nicknames, aliases, or initials.
- c) Provide applicant's permit number.
- i) Provide your mailing address. This will be used for sending correspondence regarding your application and license.
- ii) Provide a valid phone number and email address. Contact information is often used to quickly resolve questions with applications by telephone call or email. If contact information is not provided, questions regarding applications will be mailed to the applicant's mailing address and may take longer to resolve.

**3. School Information (school for which permit is requested)**

- a) Fill out each section completely.
- b) In the Name of school section, applicants must use the name as it appears on the real estate school permit. Do not use any nicknames, aliases, or initials.
- c) Applicants must furnish the physical address for the school – i.e., not a P.O. Box.
- i) Provide a valid phone number and email address. Contact information is often used to quickly resolve questions with applications by telephone call or email. If contact information is not provided, questions regarding applications will be mailed to the applicant's mailing address and may take longer to resolve.
- ii) Additional contact information is optional and will be used when the applicant cannot be reached using their primary contact information.
- d) If requesting a multiple permit for more than one school, the application must complete an additional application for each additional permit requested.
- e) **Note:** If requesting a multiple permit for more than one school, there is a fee of \$69.00 for each permit requested.

**4. Section IV – Affirmation by Written Declaration.**

- a) The applicant must sign the affirmation by written declaration.