

# EXPERIENCE CERTIFICATION STATEMENT

(To Be Completed By Principal Broker or Broker in Charge)  
Submit **ORIGINAL** only - FAX and PHOTOCOPY **will not** be accepted

NAME OF BROKER APPLICANT: \_\_\_\_\_

1. Broker applicants must have experience as a full-time (averaging at least forty hours per week and no prorata credit given for part-time real estate salesperson activity) licensed real estate salesperson associated with a licensed real estate broker for at least three (3) years of the five-year period immediately prior to the submission of the broker experience certificate application, and have practical real estate salesperson experience. No credit is given for periods during which the applicant's license was inactive, forfeited, suspended, revoked, or terminated.
2. Section 16-99-3(q), Hawaii Administrative Rules (HAR), requires a principal broker or broker in charge to provide an accurate experience certification statement.

Within ten days of receiving a written request, it shall be the responsibility of the principal broker or broker in charge of the brokerage firm to provide broker applicants formerly or presently employed by or associated with them with an accurate experience certification statement in the form provided by the commission attesting to the length of time that the broker applicant has been actively associated with or employed full-time by the brokerage firm. ***Falsification of information contained in the certification shall be cause for revocation or suspension of the broker's or brokerage firm's license and of the salesperson's license if that person is a party to the falsification.***

3. This form is in two parts. In Part I, provide current information about the principal broker or broker in charge who is completing this form. In Part II, provide information about the broker applicant during the relevant period.
4. Type or print all information in black ink. Fill in all blanks. Sign and return to the broker applicant. Incomplete or unsigned forms will **not** be accepted.

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## PART I. PRINCIPAL BROKER OR BROKER IN CHARGE COMPLETING THIS STATEMENT:

Name: \_\_\_\_\_ License No.: RB - \_\_\_\_\_  
Current Brokerage Firm: \_\_\_\_\_ Telephone No.: \_\_\_\_\_  
Address of Brokerage Firm: \_\_\_\_\_ License No.: RB - \_\_\_\_\_

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**PART II. PERIOD COVERED BY THIS STATEMENT.** The applicant was associated with the brokerage firm indicated below for the stated period. I was the principal broker or broker in charge of the brokerage firm during the period, or I am the current principal broker or broker in charge of the brokerage firm and have records to verify the information provided below.

Period Covered: From (month/day/year): \_\_\_\_\_ To (month/day/year): \_\_\_\_\_  
Name of Brokerage Firm: \_\_\_\_\_ License No.: RB \_\_\_\_\_

**NUMBER OF WEEKS** \_\_\_\_\_ the applicant devoted **40 hours per week** to real estate salesperson license activity, whether in or out of the office (do not count time spent on clerical or other non-real estate duties.)

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**Certification:** I certify that the information provided in this Experience Certification Statement is true and correct. I understand that falsification of information, any material misstatement of fact, or forgery is grounds for disciplinary action against me.

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Signature of Principal Broker or Broker in Charge                      Date                      Signature of Applicant                      Date