

## REAL ESTATE AND BUSINESS SALES REPRESENTATIVE REGISTRATION REQUEST TO REMOVE CONDITION

Full Legal Name:		
<b>Registration Nbr:</b>	RR	

I hereby request that the Commissioner for Consumer Protection remove the condition from my real estate and business sales representative registration. The Statement of Attainment attached confirms I have completed the required modules from the CPP41419 National Training Package for an unrestricted real estate and business sales representative registration.

## AUTHORISATION AND DECLARATION

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.

Further, I declare that the information and documents given with or in support of this request, whether or not provided at the time of or subsequent to lodgement, are true and correct.

Signature:\_\_\_\_\_Date:\_\_\_\_/20\_\_\_\_

Should you require assistance with completing this form please contact the Licensing Branch by telephone on 1300 304 064 (within Australia) or email <u>cplicensing@dmirs.wa.gov.au</u>.

No fee is applicable.

Lodgement of this form and the Statement of Attainment can be made:

By email:	cplicensing@dmirs.wa.gov.au
By post:	Licensing Services Locked Bag 100, East Perth WA 6892
In person:	Level 1, Mason Bird Building, 303 Sevenoaks Street, CANNINGTON WA 6109