

ARIZONA DEPARTMENT OF REAL ESTATE (ADRE)

Licensing Division

www.azre.gov 100 N. 15th Ave., Suite 201, Phoenix AZ 85007 KATIE HOBBS GOVERNOR

SUSAN NICOLSON COMMISSIONER

Out-of-State License Recognition Residency Attestation

Individuals seeking recognition of an out-of-state real estate license must attest to being an Arizona resident as defined by A.R.S. § 43-104.

"Resident" includes:

- (a) Every individual who is in this state for other than a temporary or transitory purpose.
- (b) Every individual who is domiciled in this state and who is outside the state for a temporary or transitory purpose. Any individual who is a resident of this state continues to be a resident even though temporarily absent from the state.
- (c) Every individual who spends in the aggregate more than nine months of the taxable year within this state shall be presumed to be a resident. The presumption may be overcome by competent evidence that the individual is in the state for a temporary or transitory purpose.

For Universal Recognition applicants, the following may be submitted to demonstrate Arizona residency (list is not exclusive). Check which proof of residency is included with your application.

	Arizona voter registration		
	Military Form 2058		
	Proof of filing Arizona income taxes in the most recent tax year		
	Valid Arizona driver's license		
	A dated residential rental contract with proof of payment		
	Documentation of a mortgage for a primary Arizona residence		
	Proof of establishment of Arizona utilities		
	Documentation demonstrating a change in permanent ac	ddress on all pertinent records	
	Other:		
I,, hereby attest that I have reviewed the Arizona residency (Print Name) requirements, and am an Arizona resident. Arizona Address of Residence			
(Address, Suite)			
(City, State, Zip Code)			
I do herby further attest that the proof of Arizona residency provided to the Department of Real Estate is true, accurate, and complete, and that any falsification, omission, or concealment of material fact may subject me to disciplinary action, and civil or criminal liability.			
Sign	gnature of applicant:	Date:	