



STATE OF ARIZONA
DEPARTMENT OF REAL ESTATE

DOUGLAS A. DUCEY
GOVERNOR

JUDY LOWE
COMMISSIONER

100 North 15th Avenue, Suite 201, Phoenix, Arizona 85007

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- 1) An agency [Arizona Department of Real Estate] shall waive any fee charged for an initial license for any individual applicant whose family income does not exceed two hundred percent of the federal poverty guidelines if the individual is applying for that specific license in this state for the first time.
2) Eligible applications for first time license fee waivers include:
- Original Real Estate Salesperson License
- Original Cemetery Salesperson License
- Original Membership Campground Salesperson License
- Original Real Estate Broker License
- Original Cemetery Broker License
- Original Membership Campground Broker License
- Original Temporary Salesperson License
- Original Real Estate Recovery Fund Fee
3) Applicants may wish to review the following before submitting an Optional Fee Waiver and may be required to submit additional substantiating documents to the Arizona Department of Real Estate:
a. ADRE Fee Schedule, click here
b. Arizona Real Estate Sales and Brokers Handbook, click here
c. If an Arizona Tax Return has been completed, click here
d. Click here to review the federal poverty level.
4) Applicants must submit a complete application for licensure with all supporting documentation in conjunction with the Optional Fee Waiver for Low Income Applicants.
5) Applicants should complete this form and send to the Department under the Licensing Section of the Message Center by choosing "Submit a Salesperson/Broker application", click here to submit.

OPTIONAL FEE WAIVER FOR LOW INCOME APPLICANTS

By checking this box, I voluntarily: 1.) attest that to the best of my knowledge and belief, my family income does not exceed two hundred percent of the federal poverty level; and, 2.) authorize the Arizona Department of Revenue to disclose confidential information to the Arizona Department of Real Estate to verify that my family's reported income meets the requirements for a fee waiver pursuant to A.R.S. Title 41, Chapter 6, Article 7.2 upon receipt of the following information:

Table with 4 columns: First Name, Last Name, Social Security Number, Year of Most Recent Arizona Tax Return.

I acknowledge that if I am deemed ineligible for the fee waiver, I must pay the required fee within 15 days.

X Applicant Signature

Date

1 See https://aspe.hhs.gov/poverty-guidelines for current Federal Poverty Level guidelines.