



# Real Estate Agency Council

Regulating the Ghanaian Real Estate Agency Sector

## REAL ESTATE FIRM LICENSE APPLICATION FORM

### SECTION I: FIRM INFORMATION

1. Registered Firm Name: \_\_\_\_\_
2. Corporate Registration Number: \_\_\_\_\_
3. Date of Incorporation (DD/MM/YYYY): \_\_\_\_\_
4. Firm TIN (Tax Identification Number): \_\_\_\_\_
5. Digital Address: \_\_\_\_\_
6. Legal Entity Type:  
 Sole Proprietorship    Partnership    Limited Liability Company    Corporation  
Other: \_\_\_\_\_
7. Registered Office Address:  
Street: \_\_\_\_\_  
Town/City: \_\_\_\_\_  
Region: \_\_\_\_\_  
Postal Address (if different): \_\_\_\_\_
8. Operational Area(s): \_\_\_\_\_

9. Is your firm affiliated with any international network?

Yes  No

If Yes, Specify \_\_\_\_\_

Email: [info@reac.gov.gh](mailto:info@reac.gov.gh) | Digital Address: GA-144-0550 | Contact Number: 030 277 3339 | [www.reac.gov.gh](http://www.reac.gov.gh)

1

## SECTION II: DESIGNATED BROKER DETAILS

*(Must hold a valid Individual Broker's License)*

1. Full Name (Surname First): \_\_\_\_\_

2. Individual License No.: \_\_\_\_\_

3. Contact Information:

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

4. Residential/Digital Address: \_\_\_\_\_

## SECTION III: OWNERSHIP & MANAGEMENT STRUCTURE

1. Key Management Personnel (Name, Position and contact):

---

---

---

---

---

---

---

---

Email: [info@reac.gov.gh](mailto:info@reac.gov.gh) | Digital Address: GA-144-0550 | Contact Number: 030 277 3339 | [www.reac.gov.gh](http://www.reac.gov.gh)

2

## SECTION IV: SCOPE OF SERVICES

Residential Sales    Commercial Sales    Property Management    Valuation    Leasing    Other:

\_\_\_\_\_

## SECTION V: SUPPORTING DOCUMENTS

*Attach certified copies of:*

- Certificate of Incorporation / Business Registration
- Copy of Designated Broker's valid license
- Detailed firm profile & organizational chart
- Proof of TIN and Digital Address
- Firm Tax Clearance Certificate
- Professional Indemnity Cover
- One (1) Passport-sized photographs of Designated Broker
- Evidence of payment of firm licensing fee

## SECTION V – DECLARATION BY APPLICANT

I/We, the undersigned, hereby declare that the information provided is true and complete. I/We agree to abide by the Code of Ethics and Professional Standards of the Real Estate Agency Council. I/We understand that any misrepresentation may lead to refusal or revocation of the firm license.

Signature: \_\_\_\_\_

Witness \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## FOR OFFICIAL USE ONLY

Application Received On: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Received By: \_\_\_\_\_

Signature: \_\_\_\_\_

Council Email: [info@reac.gov.gh](mailto:info@reac.gov.gh) | Digital Address: GA-144-0550 | Contact Number: 030 277 3339 | [www.reac.gov.gh](http://www.reac.gov.gh)

## REVIEW STATUS:

Approved

Deferred (Reason): \_\_\_\_\_

Rejected (Reason): \_\_\_\_\_

Approved By: \_\_\_\_\_

Designation: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Council Stamp:

## SECTION VI: PAYMENT DETAILS

**Bank: Ghana Commercial Bank**

**Branch: High Street Branch**

**Account Name: Real Estate Agency Council- REAC**

**Account Number: 1011130038901**

**Firm Registration Fee: GHC 2,850**