

State of Florida
Department of Business and Professional Regulation
Board of Auctioneers
Application for Initial Licensure as Auctioneer Apprentice or Change of Sponsor
Form # DBPR AU-4151

APPLICATION CHECKLIST – IMPORTANT – Submit all items on the checklist below with your application to ensure faster processing. Always keep a copy of your application and any supporting documents submitted to the Department.

TRANSACTION	APPLICATION REQUIREMENTS
Initial Licensure for Auctioneer Apprentice	<input type="checkbox"/> Pay \$205 fee (make check payable to the Department of Business and Professional Regulation) <input type="checkbox"/> Complete application <input type="checkbox"/> Supply documentation as requested in background questions (if applicable)
Change of Sponsor	<input type="checkbox"/> Pay \$50 fee (make check payable to the Department of Business and Professional Regulation) <input type="checkbox"/> Complete application <input type="checkbox"/> Supply documentation as requested in background questions (if applicable)

Please mail your completed application, documentation and required fee(s) to:
Department of Business and Professional Regulation
2601 Blair Stone Road
Tallahassee, FL 32399-0783

General Information:

Auctioneers can only sponsor three apprentices at any given time. Any auctioneer who serves as a sponsor shall have held a valid Florida auctioneers license for three consecutive years preceding the date on which that auctioneer is named as sponsor of the apprentice. Please verify your proposed sponsor meets the criteria before submitting your application. If you are changing your sponsor please make sure an Apprentice Termination Form has been submitted from the previous sponsor.

Application Instructions

- a. **Section I**
 - i. Indicate which license or registration type you are applying for. Check only one of the application types.
 - ii. Provide your previous license or registration number.
- b. **Section II**
 - i. Fill out each section completely.
 - ii. In the Full Legal Name section, applicants must use the name as it appears on his or her Social Security card. Do not use nicknames or initials.
 - iii. Applicants must furnish their current mailing address.
- c. **Section III (a), (b), and (c)**
 - i. Question 1:
 - (1) If you answer "yes" to this question, you must complete Section III (b) of the application and provide a copy of the arrest report, copies of the disposition or final order(s), and documentation proving all sanctions have been served and satisfied. **You must supply this documentation for each occurrence.** If you are unable to supply this documentation, a certified statement from the clerk of court for the relevant jurisdiction stating the status of records is required.
 - (2) If you are still on probation, you must supply a letter from your probation officer, on official letterhead, stating the status of your probation.

- ii. Question 2:
 - (1) If you answer “yes” to this question, you must complete Section III (b) of the application and provide a copy of the judgment or decree. You must also supply documentation proving all sanctions have been served and satisfied, or if not, stating the current status of any proceedings.
- iii. Question 3:
 - (1) If you answer “yes” to this question, you must complete Section III (c) of the application and supply copies of documentation explaining the denial or pending action.
- iv. Question 4:
 - (1) If you answer “yes” to this question, you must complete Section III (c) of the application and supply copies of the order(s) showing the disciplinary action taken against the license, or documentation showing the status of the pending action.
- d. **Section IV**
 - i. This section is required to be completed for either transaction to be processed.
 - ii. An Auctioneer can only sponsor three apprentices at any given time.
- e. **Section V**
 - i. Please read and sign the affirmation by written declaration.
 - ii. If the applicant fails to sign the affirmation statement, the Department will not process the application.

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If you have any questions or need assistance in completing this application, please contact the Department of Business and Professional Regulation, Customer Contact Center, at **850.487.1395**.
For additional information see the Instructions at the beginning of this application.

Section I – Application Type

CHECK ONLY ONE OF THE APPLICATION TYPES
<input type="checkbox"/> Application for Initial Licensure as Auctioneer Apprentice [4801/1030]
<input type="checkbox"/> Application for Change of Sponsor [4801/3021]

Section II – Applicant Information

APPLICANT INFORMATION			
Social Security Number*			
FULL LEGAL NAME			
Last/Surname	First	Middle	Suffix
Birth Date (MM/DD/YYYY) / /	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		
MAILING ADDRESS			
Street Address or P.O. Box			
City	State	Zip Code (+4 optional)	
County (if Florida address)	Country		
CONTACT INFORMATION			
Primary Phone Number	Primary E-Mail Address		
BUSINESS LOCATION ADDRESS			
Business/Firm Name			
Street Address			
City	State	Zip Code (+4 optional)	
County (if Florida address)	Country		

* The disclosure of your Social Security number is mandatory on all professional and occupational license applications, is solicited by the authority granted by 42 U.S.C. §§ 653 and 654, and will be used by the Department of Business and Professional Regulation pursuant to §§ 409.2577, 409.2598, 455.203(9), and 559.79(3), Florida Statutes, for the efficient screening of applicants and licensees by a Title IV-D child support agency to assure compliance with child support obligations. It is also required by § 559.79(1), Florida Statutes, for determining eligibility for licensure and mandated by the authority granted by 42 U.S.C. § 405(c)(2)(C)(i), to be used by the Department of Business and Professional Regulation to identify licensees for tax administration purposes.



Section II – Applicant Information – continued

RESIDENCE ADDRESS (IF DIFFERENT THAN MAILING ADDRESS)			
Street Address			
City	State	Zip Code (+4 optional)	
County (if Florida address)	Country		
ADDITIONAL CONTACT INFORMATION (OPTIONAL)			
Alternate Phone Number		Fax Number	
Alternate E-mail Address			
CURRENT/PRIOR LICENSE INFORMATION			
If you currently hold or have previously held a business or professional license/registration in Florida or elsewhere, please list each one below (attach additional copies of this page as necessary):			
1. License/Registration Type	State	Date (From) / /	Date (To) / /
License Number		Name Used	
2. License/Registration Type	State	Date (From) / /	Date (To) / /
License Number		Name Used	
3. License/Registration Type	State	Date (From) / /	Date (To) / /
License Number		Name Used	
PRIOR NAME INFORMATION			
Have you used, been known as, or are currently known by another name (e.g., maiden name or nickname) or alias other than the name signed to the application? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If your answer is yes, state name or names used below:			
Last/Surname	First	Middle	Suffix
Last/Surname	First	Middle	Suffix
Last/Surname	First	Middle	Suffix

Section III (a) – Background Questions

BACKGROUND QUESTIONS			
1.	<input type="checkbox"/> Yes (If yes, please complete Section III (b))	<input type="checkbox"/> No	Have you ever been convicted or found guilty of, or entered a plea of nolo contendere or guilty to, regardless of adjudication, a crime in any jurisdiction, or are you currently under criminal investigation? This question applies to any criminal violation of the laws of any municipality, county, state or nation, including felony, misdemeanor and traffic offenses (but not parking, speeding, inspection, or traffic signal violations), without regard to whether you were placed on probation, had adjudication withheld, were paroled, or pardoned. If you intend to answer "NO" because you believe those records have been expunged or sealed by court order pursuant to Section 943.0585 or 943.059, Florida Statutes, or applicable law of another state, you are responsible for verifying the expungement or sealing prior to answering "NO." YOUR ANSWER TO THIS QUESTION MAY BE CHECKED AGAINST LOCAL, STATE AND FEDERAL RECORDS. FAILURE TO ANSWER THIS QUESTION ACCURATELY MAY RESULT IN THE DENIAL OR REVOCATION OF YOUR LICENSE. IF YOU DO NOT FULLY UNDERSTAND THIS QUESTION, CONSULT WITH AN ATTORNEY OR CONTACT THE DEPARTMENT.
2.	<input type="checkbox"/> Yes (If yes, please complete Section III (b))	<input type="checkbox"/> No	Has any judgment or decree of a court been entered against you in this or any other state, province, district, territory, possession or nation, related to the practice or profession for which you are applying, or is there any such case or investigation pending?
3.	<input type="checkbox"/> Yes (If yes, please complete Section III (c))	<input type="checkbox"/> No	Have you ever had an application for registration, certification, or licensure in Florida or in any other jurisdiction denied, or is there now pending a proceeding or investigation to deny such an application?
4.	<input type="checkbox"/> Yes (If yes, please complete Section III (c))	<input type="checkbox"/> No	Has any license, registration, or permit to practice any regulated profession, occupation, vocation, or business been revoked, annulled, suspended, relinquished, surrendered, or otherwise disciplined in Florida or in any other jurisdiction, or is any such proceeding or investigation now pending?

If you answered "YES" to any question in questions 1-4 above, please refer to Section C of the application instructions for details on providing complete explanations, including requirements for submitting supporting legal documents. Please complete Section III (b) for your response to questions 1 and 2, and complete Section III (c) for your response to questions 3 and 4. If you have more than two offenses to document in Section III (b), or more than one offense to document in Section III (c), attach additional pages as necessary.

Section III (b) – Explanation(s) for Background Questions 1 and 2

EXPLANATION	
Offense	
County	State
Penalty/Disposition	
Date of Offense (MM/DD/YYYY) / /	Have all sanctions been satisfied? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description	

Section III (b) – Explanation(s) for Background Questions 1 and 2 – continued

EXPLANATION	
Offense	
County	State
Penalty/Disposition	
Date of Offense (MM/DD/YYYY) / /	Have all sanctions been satisfied? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description	

Section III (c) – Explanation(s) for Background Questions 3 and 4

EXPLANATION	

Section IV – Sponsor Information

SPONSOR INFORMATION	
Sponsor Name:	License Number:
Name of Auction Business:	License Number:
Supervision Start Date(mm/dd/yyyy):	
List name and license number of other apprentices now under your supervision:	
Name:	License Number:
Name:	License Number:
Name:	License Number:
<p>Under penalty of perjury, I _____, vouch for the truth and accuracy of all of the statements and answers contained herein. I have read Chapter 468 Part VI, Florida Statutes, and Rule 61G2, Florida Administrative Code, and understand my responsibilities and the limitations of being the Sponsor for an Auctioneer Apprentice Program.</p> <p>Sponsor's Signature: _____ Date: ___/___/___</p> <p>NOTE: Auctioneers can only sponsor three apprentices at any given time. If you need to terminate an apprenticeship, please submit DBPR AU – 4158 Apprentice Termination Form along with this application.</p>	

Section V – Affirmation By Written Declaration

AFFIRMATION BY WRITTEN DECLARATION	
<p>I certify that I am empowered to execute this application as required by Section 559.79, Florida Statutes. I understand that my signature on this written declaration has the same legal effect as an oath or affirmation. Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. I understand that falsification of any material information on this application may result in criminal penalty or administrative action, including a fine, suspension or revocation of the license.</p>	
Signature:	Date:
Print Name:	