

# Wisconsin Department of Safety and Professional Services

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**DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES**  
**NOTICE OF BROKER ENGAGING IN INDEPENDENT PRACTICE**  
**NO FEE REQUIRED**

**Information:** Notification must be submitted to the Department before engaging in independent real estate practice.

<b>Section A: Broker Information</b>		<b>Broker Application Number</b> (if applicable)	
<b>Name under which the Broker will engage in independent practice</b>			
<b>Name of the Firm which the Broker is associated with</b>			
<b>Brokers' Address</b> (street, city, state, zip code)		<b>Broker's Daytime Telephone Number</b>	
<input type="text"/>		<input type="text"/> - <input type="text"/> - <input type="text"/>	
<b>License Number</b>	<input type="text"/>	<b>Type of License</b> <input type="checkbox"/> Sole Proprietor Broker <input type="checkbox"/> Broker Business Entity	

<b>Section B: Complete and sign below.</b>			
The broker will engage in independent real estate practice effective: <input type="text"/> / <input type="text"/> / <input type="text"/>			
<b>Print Name of Person Signing Below:</b>		<b>Date:</b>	
<input type="text"/>		<input type="text"/> / <input type="text"/> / <input type="text"/>	
<b>Daytime Telephone Number:</b> <input type="text"/> - <input type="text"/> - <input type="text"/>			
<b>Signature of Sole Proprietor Broker or Representative Broker of Business Entity:</b> (If unable to provide a digital signature print and sign form.)			