P.O Box 30089-00100
Nairobi Kenya
Tel: +254 741 088 144
Email: info@estateagentsboard.or.ke
Old Building Ground Floor,
Survey of Kenya – Thika Road

Form I (R. 2)

REPUBLIC OF KENYA
FIRST SCHEDULE
ESTATE AGENTS ACT [Cap. 533.]
APPLICATION FOR REGISTRATION AS AN ESTATE AGENT

The Registrar,
Estate Agents Registration Board,
P.O. Box 30089 -00100
NAIROBI-KENYA.
TEL: 0741088144

PASSPORT SIZE

PHOTOGRAPH

READ CAREFULLY BEFORE COMPLETING ALL SECTIONS

A – GENERAL INFORMATION

1. Surname _____ Other names _____ Sex: Male ☐ Female ☐ (tick)

2. Postal address _____ Code _____ Town _____

3. Residential Address: Estate _____ Road _____ House No. _____

4. Name of employer/business _____ Building/Court _____ Road/Street _____ Floor/ Office No. _____

5. Office telephone number _____ Mobile No _____ Email _____

6. Nationality/Citizenship _____ ID/Passport No. _____ Date of birth _____

B – EDUCATIONAL PARTICULARS

1. Schools and Colleges attended:

Schools and Colleges in order	From	To	Certificates, Diplomas, Degrees and other qualifications obtained

2. Membership of professional institutions:

Name of Organisation	Date of Registration	Category of Registration

C – EXPERIENCE AND EMPLOYMENT

Name of Employer	**Postal and Email Address, Tel. No.**	**From**	**To**	**Designation**

D – SELF EMPLOYMENT

Name of Company	Postal & Email Address, Tel. No	From	To	Nature of Business

E – PRACTICE IN ESTATE AGENCY

Name of Employer	Postal and Email Address , tel. no.	From	To	Duties

F. RECOMMENDATION FROM A REGISTERED & PRACTISING ESTATE AGENT WHO HAS TRAINED YOU FOR AT LEAST 2 YEARS

The registered and practising Estate Agent should give you a letter of recommendation in a format that can be downloaded here:

		Yes☐ No ☐
Name of Registered Estate Agent	EARB Registration No.	Holds current Practising Certificate
Company Name	Office Telephone No	Duration of Training
Postal Address	Mobile No.	Email

F – OTHER BUSINESS PRACTICES

(Give the names and addresses of all other business practices you are currently involved in)

Name	Postal Address	From	To	Capacity

G – OTHER GROUNDS TO SUPPORT YOUR APPLICATION

Give name and address of an official referee who knows your background history well, e.g. magistrate, chief or assistant chief of your area, teacher, public servant, religious leader.

Name _____ Designation _____

Postal address _____ Mobile no. _____ Email _____

H. — BANKRUPTCY OR CONVICTION

Have you ever been declared bankrupt or convicted of any offence involving fraud or dishonesty?

(Please tick as appropriate) Yes ☐ No ☐

J – DECLARATION

I, declare that the foregoing statements are true and correct to the best of my knowledge and belief. I understand that any statement contained in this application which is found to be false shall invalidate this application. I have read the Estate Agents Act (Cap. 533) understood it and undertake to be bound by the Act and any amendments thereto or replacement thereof so long as I am a registered estate agent.

Applicant's signature _____ Date _____

Witness: Full Name _____ Postal Address _____ Tel. No. _____ Email address _____

Witness's signature _____

Please attach the following: -

I. Passport size photograph to attach to the form.
II. National identification card or passport
III. Updated Curriculum Vitae.
IV. Certified copies of Educational Certificates
V. Letter of recommendation from a Registered Estate Agent who has trained you and their Up-to-date practising licence
VI. Current Certificate of good conduct from the DCI
VII. Certificate of good standing from professional membership body. (if any)
VIII. Receipt confirming payment of application fee of Ksh. 1,000

Arrange the documents in order of Application Form, CV, Academic Documents, Recommendation letter, their up-to-date licence, police clearance then other documents and deliver hard copies at EARB office.

FOR OFFICIAL USE

Application No. .....

Date acknowledged .....

Approved/Rejected Minute No. .....

Date Notification sent .....

Gazette Notice No. .....

Certificate despatched .....

Certificate Acknowledged .....

Registrar's Signature .....

Date .....

Date received .....

Receipt No. ..... Date .....

Deferred Minute No. .....

Registration No. .....

Board Member's Signature .....

Date .....

Chairman's Signature .....

Date .....