



PUBLIC PROTECTION CABINET

Andy Beshear
GOVERNOR

Jacqueline Coleman
LIEUTENANT GOVERNOR

Kentucky Real Estate Authority
Kentucky Real Estate Commission

500 Mero Street, 2NE09
Frankfort, KY 40601
Phone: (502) 564-7760

Ray A. Perry
SECRETARY

DJ Wasson
DEPUTY SECRETARY

2024 CONTINUING EDUCATION DELINQUENCY PLAN

WHEREAS, the undersigned Licensee held an active license issued by the Kentucky Real Estate Commission (“Commission”) to engage in real estate brokerage in the Commonwealth of Kentucky in 2024; and

WHEREAS, the undersigned Licensee was required to complete the continuing education requirements for 2024 on or before **December 31, 2024** and was notified of the delinquency on **January 17, 2025**; and

WHEREAS, the undersigned Licensee does not possess proof of completion of his/her 2024 continuing education obligation, as required under KRS 324.085(1) and 201 KAR 11:210, Section 11; and

WHEREAS, the undersigned Licensee was cancelled for failure to begin continuing education on or before 11:59 pm on December 31, and complete continuing education on or before 11:59 pm on January 5, 2025; and

WHEREAS, 201 KAR 11:210 mandates payment of a \$1,000.00 fine and entry into a Delinquency Plan; and

WHEREAS, to activate the cancelled license, the undersigned Licensee seeks to (You **MUST** check one):

Reinstatement and maintain an **active** license under the terms and conditions of this Delinquency Plan, which includes paying a \$1,000 fine, the mandatory change fee of \$10.00 to remove cancelled status on the license, the mandatory change fee of \$10.00 to affiliate with a principal broker, and completing the delinquent continuing education course(s) for 2024 on or before **April 30, 2025**,

OR

Place the license in **inactive** status under the terms and conditions of this Delinquency Plan, which includes paying a \$1,000 fine and submitting proof of an extended reporting period coverage insurance policy, pursuant to KRS 324.310 (2)(c) and 201 KAR 11:210, Section 10 (2)(a), the mandatory change fee of \$10.00 to remove cancelled status on the license, and the mandatory change fee of \$10.00 to place the license in inactive status.

ACCORDINGLY, UNDERSIGNED LICENSEE UNDERSTANDS AND AGREES:

1. To pay a \$1,000.00 fine, plus each applicable \$10.00 mandatory change fee, for a total of \$1020.00, within thirty (30) days of executing this Agreement, made payable by check or money order to the Kentucky State Treasurer, for failing to complete his/her 2024 continuing education obligation on or before December 31, 2024;
2. If the undersigned Licensee seeks to maintain an active license:
 - a. Undersigned Licensee shall pay the fine and mandatory change fees before Commission staff reactivate the license; and
 - b. Undersigned Licensee shall complete all delinquent 2024 continuing education on or before **April 30, 2025**, or the Commission will initiate an administrative action to suspend the undersigned Licensee's license for six (6) months;
3. If the undersigned Licensee seeks to place the license in inactive status:
 - a. Undersigned Licensee shall submit proof of holding an extended reporting period coverage insurance policy, pay the fine, and pay the mandatory change fees before Commission staff place the license in inactive status; and
 - b. Undersigned Licensee shall take all required actions to reactive the inactive license as may be in effect at the time the undersigned Licensee seeks to reactivate;
4. Undersigned Licensee acknowledges continuing education delinquency plans are processed in the order payment is received;
5. Undersigned Licensee expressly acknowledges that Licensees holding a cancelled or inactive license are prohibited from engaging in real estate brokerage as defined in KRS 324.010(1); and
6. Undersigned Licensee expressly acknowledges that he/she is completely informed of the due process rights afforded under KRS 324.170 and KRS Chapter 13B and knowingly, willingly, and voluntarily agrees to waive those rights and enter into this Delinquency Plan.

AGREED TO BY:

Full Name: _____ License No.: _____

Daytime/Cell Phone: _____ Email: _____

Home Address: _____

Principal Broker's Name: _____

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Licensee's Signature (Required)

Date