



COLORADO

Department of
Regulatory Agencies

Division of Real Estate

Affirmation and Questionnaire Concerning Real Estate Activity

Instructions:

Please complete the following questionnaire to the best of your knowledge as of the date that you sign the affirmation. You may attach additional pages, if necessary. Then, scan and email the completed form and any attachments to: **Auditor Email Address**

PLEASE AVOID MAILING DOCUMENTS AS IT DELAYS THE AUDIT PROCESS. IF EMAILING THE DOCUMENTS IS NOT POSSIBLE, PLEASE CONTACT ME DIRECTLY.

Note: The new 2019 Colorado Real Estate Manual is now available for purchase at www.lexisnexis.com.

Questionnaire:

Please include a copy of current E&O Insurance for both the registered broker and the registered company.

1. If neither you nor your associate brokers performed any activity which requires a real estate license (even if you are “actively” licensed) or managed any entity for others (i.e. limited partnerships) during the 12 month period prior to the date of the Initial Notification of Audit, please initial below, skip to paragraph 19 at the end of this document, sign and return this form to the examiner indicated above.

Broker Initials _____ Daytime Telephone Number (_____) _____

2. I/we have used my/our real estate license(s) to conduct or perform the types of activities generally described below (whether or not they require a license) during the 12 month period prior to the date of the attached Initial Notification of Audit. For sales, please list the number of transactions in each category. If your activity does not fit the items listed, please explain in the * space below these columns or attach a separate note of explanation to this form.

Sales Transactions	Transactions Currently Under Contract	Transactions Closed
Residential		
Commercial/Industrial		



Subdivision/Time Share		
Farm/Ranch		
Raw Land		
Other/Own Account/Exempt*		

Please provide a list of the above transactions that includes the address, type (residential, etc.), broker, status of the transaction and if closed, the date of the closing. Indicate any transactions for which you acted as a “transaction broker” and the circumstances surrounding the reason for that relationship.

Property Management Activity	# of Units Managed	# of Separate Owners
Residential Properties		
Commercial Properties		
Short-term Rentals (30 days or less) and Timeshares		
Home Owner Assoc.		
Other/Own Account/Exempt*		

****Attach any appropriate explanatory comments for any activity reported in 2 above and please include a list of properties managed:***

3. Have you been audited by the Colorado Division of Real Estate before? If yes, please provide any documentation (correction letter or closing letter), and/or describe any correction required or actions taken by the auditor.

4. Please identify the supervising broker associate/manager and list the address and the telephone number(s) for any “branch office(s)” you currently operate (if ‘none’ please so state):

5. Please identify any key person, office manager or transaction manager to be contacted for scheduling and completing this audit and who may be interviewed concerning the operation of your trust accounts, related documents and transaction records.



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6. What is the address where your transaction files and /or property management files are located?
(Please note if this is a private residence.)
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7. I do ___ do not___ maintain real estate trust or escrow accounts.

If you actively use trust or escrow accounts in your real estate business for either sales or property management rents and security deposits, please provide the following information.

Bank Name	Account #	Purpose (Be Specific)

For the accounts listed above, please provide a copy of the most recent signature cards, bank reconciliation(s), bank statement(s), and corresponding ledger(s) per Commission Rule E-1(o)(1)(2)&(3) (Trust Accounts-Three Way Reconciliation). **For this requirement, submit the Reconciliation Template as a cover sheet and provide CLEAR support documentation of where EACH figure came from.** If you have more than 3 accounts, please call or email for further directions.

8. Describe the procedures by which you ensure compliance with Commission Rule E-1(o)(1)(2)&(3) (Trust Accounts-Three Way Reconciliation): (Please provide name of individual who can be contacted, if someone other than the broker is involved with the trust accounting process.)
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9. Identify any of your broker associates that engage in (or may engage in) property management activities:
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10. If you (or any of your broker associates) manage property, attach a blank copy of the owners' management agreement and lease that are currently used. **Please complete the attached checklist pertaining to the relevant items that should be included in both lease and management agreement.**
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11. If you (or any of your broker associates) manage property, please describe your/their maintenance procedures, whether you/they have an in-house or affiliated maintenance company. Do you have any mark ups on maintenance?



12. Has your company purchased any other property management companies since the formation of your organization? If so, when and describe details of the purchase (company, # of doors etc.)

13. Please identify any title companies routinely utilized to hold earnest money deposits for sales transactions:

14. Provide a copy of your full written office policy manual AND written brokerage relationship policy in accordance with C.R.S. 12-61-801 and Commission Rule E-39. **Please complete the attached checklist pertaining to the relevant items that should be included in the Office Policy Manual. Also, please attach evidence that brokers in your office have received the manual and any updates to the manual.**

15. Describe the procedures by which you ensure compliance with Commission Rule E-25 Continuing Duty to Disclose Conflict of Interest and License Status.

16. In the past 12 months, have you or any of your broker associates utilized contract assignments in order to facilitate transactions? If so, please list the transactions and broker associate:

17. Describe the procedures by which you ensure compliance with Commission Rule E-29 Employing Broker Exercises Authority, Direction and Control.

18. Describe the procedures by which you ensure compliance with Commission Rule E-31 Reasonable Supervision.

19. Describe the procedures by which you ensure compliance with Commission Rule E-32 High Level of Supervision.



20. Describe the procedures by which you ensure compliance with Commission Rule E-46 Affiliated Business Arrangement Disclosures.

21. Please include a copy of current E&O Insurance for both the registered broker and the registered brokerage firm, if applicable.

Affirmation:

22. I declare pursuant to C.R.S. 18-8-503 under penalty of perjury in the second degree that the statements and information provided herein are true and complete to the best of my current knowledge and belief on this date.

Printed Name

License Number

Signature

Date

