



**Real Estate Board
 BRANCH OFFICE LICENSE APPLICATION
 Fee \$190.00**

A check or money order payable to the TREASURER OF VIRGINIA,
 or a completed [credit card insert](#) must be sent with your application package.
APPLICATION FEES ARE NOT REFUNDABLE.

1. Firm/Sole Proprietorship Name _____

2. Trade, "Doing Business As" (DBA) or Fictitious Name _____

3. Firm's/Sole Proprietor Virginia Real Estate License Number

0	2	2	6						
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DO NOT INCLUDE DASHES (1234567890)

4. Firm/Sole Proprietor Mailing Address _____

City State Zip Code

5. Firm Contact Numbers _____
Primary Telephone Alternate Telephone Fax

6. Firm E-mail Address _____
Email address is considered a public record and will be disclosed upon request from a third party.

7. Firm/Sole Proprietor Principal Broker's Name

Last First Middle Generation

8. Principal Broker's Virginia Real Estate License Number

0	2	2	5						
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DO NOT INCLUDE DASHES (1234567890)

9. Branch Office Mailing Address **ADDRESS MUST BE DIFFERENT FROM THE FIRM ADDRESS**
 (PO Box accepted) _____

City State Zip Code

10. Branch Office Street Address **ADDRESS MUST BE DIFFERENT FROM THE FIRM ADDRESS**
PHYSICAL ADDRESS REQUIRED
 (PO Box not accepted) Check here if Street Address is the same as the Mailing Address listed above.

City State Zip Code

11. Branch Office Contact Numbers _____
Primary Telephone Alternate Telephone Fax

<small>BOARD USE ONLY</small>	<small>SCC NO.</small>	<small>ISSUE DATE</small>	<small>ACTIVE</small> No <input type="checkbox"/> Yes <input type="checkbox"/>	<small>TRADE NAME REGISTERED</small> No <input type="checkbox"/> Yes <input type="checkbox"/>	<small>DATE</small>	
<small>OFFICE USE ONLY</small>	<small>DATE</small>	<small>FEE</small>	<small>TRANS CODE</small> 1022	<small>ENTITY #</small>	<small>FILE #/LICENSE #</small> 0226	<small>ISSUE DATE</small>

12. Branch Office Supervising Broker's Name

Last First Middle Generation

13. Branch Office Supervising Broker's Virginia Real Estate License Number

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DO NOT INCLUDE DASHES (1234567890)

14. By signing this application, I certify the following statements (as indicated by placing my initials next to each statement):

_____ I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.

_____ I will notify the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration.

_____ I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the Department may contact. I also agree to present any credentials or documents required or requested by the Department.

_____ I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 21, of the *Code of Virginia* and the *Virginia Real Estate Regulations*.

Supervising Broker's Signature _____ Date _____

Firm Principal Broker's Signature _____ Date _____