Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-8526
www.dpor.virginia.gov



Real Estate Board SALESPERSON ACTIVATE/TRANSFER APPLICATION Fee \$90.00

A check or money order payable to the <u>TREASURER OF VIRGINIA</u>, or a completed <u>credit card insert</u> must be mailed with your application package.

APPLICATION FEES ARE NOT REFUNDABLE.

Select one of the following:

			Х	Actio	n			
				Activation of Sales	person License			
				Transfer of Salespe	rson License			
		•	•	eal Estate Salespe your license <u>prior to</u>			on. If yo	ur license has
1.	Enter your cur	rent Virginia R	eal Estate Sa	alesperson License	number and exp	oiration date below.		
	Virginia Lice	ense Number	0 2 2	5		Expiration Date		
2.	Legal Name	Last		First		Middle		Generation
3.	Provide at leas		-	tification numbers*:	[] - [
	<u>Virginia</u>	Department of	Motor Vehic	cles Control Number		DO NOT INCLUDE DA	ASHES (123	<u></u> 34567890)
	* State law r	equires every appli	cant for a licens	ed on examination, preve, certificate, registration of al security number or a cont	other authorization	to engage in a business,	trade, profe	ession or occupation
4.	Applicant Maili (PO Box a							
				City			State	Zip Code
5.	Applicant Stree RESIDENTIAL ADDRESS R (PO Box not	(PHYSICAL) EQUIRED		Check here if Stre	et Address is the <u>san</u>	ne as the Mailing Address	isted above	
	,	. ,		City			State	Zip Code
6.	Applicant's Co	ntact Numbers	i	Primary Telephone	e Alte	rnate Telephone		Fax
7.	Applicant's E-r	nail Address		F-mail address is con	sidered a nublic reco	rd and will be disclosed up	on request t	from a third party
	DATE	SEC	траме соог	E-mail address is cor	эмеген а рилпе гесо	FILE #/LICENSE #	on request I	
OFFICE USE	DATE	FEE	TRANS CODE	ENIIIT#	0225	FILE #/LICENSE #		ISSUE DATE

8.	Firm/Sole Proprietorship information with whom your license will be <i>active</i> : A. Firm/Sole Proprietorship Name											
	B. Trade, "Doing Business As" (DBA) or Fictitious Name											
	C. Firm/Sole	Proprietor Virginia Real Estate					2 6 1 1 INCLUDE DASHES (123			34567890)		
	D. Firm/Sole	Proprietor Mailing Address										
			City				State	Zip	Coo	le		
	ADDF	Proprietor Street Address PHYSICAL RESS REQUIRED ox not accepted)	Check here if the Street Address is the same as the Mailing Address listed above.									
	,	. ,	City				State	Zip	Cod	le		
	F. Firm/Sole	Proprietor Contact Numbers										
	G. Firm/Sole	Proprietor E-mail Address		Primary Telephone	Alternat	te Telephone		Fax				
	H. Firm/Sole Proprietor Principal Broker's Name											
	Last	First			Middle				Conc	ration		
		Broker's Virginia Real Estate Li	cense N	lumber	Middle	0 2 2 DO NOT INC	5 CLUDE DASH	ES (123				
9.	Will you be af No Yes	filiating with a Branch Office of If no, go to question #10. If yes, provide the following B										
		A. Branch Office Virginia Rea	0 2 2 6 DO NOT INCLUDE DASHES (1234567890)									
		B. Branch Office Mailing Add	ress									
		C. Branch Office Contact Nu	mbers	City Primary Telephon	- ΔΙτ	ernate Telephone	State	Zip	Cod	le		
		D. Branch Office Supervising	Broker'	• •	C All	emate relephone		10	iX			
		Last	-	First	<u>M</u>	iddle			Gene	eration		
		E. Branch Supervising Broke				0 2 2	5 CLUDE DASH					
10.	Have you even body?	er been subject to a disciplinar	y action	taken by any (incl	luding Virg	inia) local, sta	ate or nati	onal ı	egu	latory		
	Yes	If yes, complete a <u>Disciplinary</u>	Action	Reporting Form.								

11. A.	Have you ever been convicted or found guilty, regardless of the mass States of any felony ? Any plea of nolo contendere shall be considered to the mass of the ma	•
	· —	rm for any new criminal conviction that has not been
В.	Have you been convicted or found guilty, regardless of the man States of a misdemeanor involving moral turpitude , sexual offeinjury within the past five years? Any plea of nolo contendere shall	ense, non-marijuana drug distribution or physical
	No Service Ser	rm for any new criminal conviction that has not been
12.	Have you ever violated a fair housing law in any jurisdiction of the	United States?
	Yes If yes, attach a certified copy of the final order, de court or regulatory agency with lawful authority to iss	
Real E Depart n-fact, appear applica	ning this application, you acknowledge that if you are not a Virginia resid state License, you understand that this application serves as a written porment of Professional and Occupational Regulation, and his/her successor in your stead, upon whom all legal process against and notice to you reance on your behalf in any case or proceedings arising out of the tration you hereby agree that any lawful process against you which is duly egal force and validity as if served upon you.	ower of attorney, whereby you appoint the Director of the rs in office, to be your true and lawful agent and attorney-may be served and who is hereby authorized to enter an ade or profession practiced; and that by submitting this
13.	By signing this application, I certify the following statements:	
	The foregoing statements and answers are true, and I have a Board's decision to approve this application. Furthermore, I a pertinent or material information in connection with this applic revocation or denial of license.	m aware that submitting false information or omitting
	I will notify the Board of any changes to the information provid license including, but not limited to, any disciplinary action jurisdiction).	• • • • • • • • • • • • • • • • • • • •
	I authorize the Department of Professional and Occupation concerning me or any statement in this application from any palso agree to present any credentials or documents required as	person, or any source the Department may contact. I
	I authorize any federal, state or local government agency, business to release information which may be required for a b	
	I have read, understand and complied with all the laws of Virg Title 54.1, Chapter 21 of the Code of Virginia and the Virginia	•
	I have a good reputation for honesty, truthfulness, and fair de real estate broker or real estate salesperson in such a mannel	• · · · · · · · · · · · · · · · · · · ·
	If I am transferring my license, I affirm I have notified my curren	t broker of the fact that I am leaving his/her firm.
	Applicant's Signature	Date

l,		authorize					
Broker's Statement (to be completed by either the princ responsible for the applicant's real estate activities) I, Print Name of Principal or Supervising Broker to apply to transfer his/her license with the real estate filicense has not expired, I have reviewed the application application is complete. It is my opinion that said license competent to transact the business of a real estate broke certify that I will actively supervise and train the licensee hereby assume responsibility effective as of the date inc 54.1, Chapter 21, of the Code of Virginia and the Real Es Principal or Supervising Broker's Signature Principal Broker Supervising Broker Broker's Virginia Real Estate The activating/transferring salesperson must first sign and Broker/Sole Proprietor signing Applications cannot be processed and licenses activate the prope				oplicant's N			
license has not expired, I happlication is complete. It is competent to transact the bucertify that I will actively suphereby assume responsibility.	ave reviewed the applicati my opinion that said licens isiness of a real estate brokervise and train the license y effective as of the date in	on as well as the ansize is honest, truthful asker in such a manner asker during the period thandicated below for the	swers and of as to s ne lice e abov	provi f good afegu nsee	ded by t reputati ard the in is under	he applion and the terest of the my super	cant and hat he/sh f the pub ervision a
Principal or Supervising Brol	ker's Signature				Date	;	
•	Broker's Virginia Real Est	ate License Number	0	2 2 10 NOT	5 INCLUDE D	ASHES (12	234567890)
The activating/transferring				the P	rincipal/S	upervisin	g
Applications cannot be p		•	not pla	iced o	n the app	lication i	i <u>n</u>
"HMENTS: (Check the attack	ments included with this ar	onlication)					
CHMENTS: (Check the attacl	nments included with this ap Form(s) and all attachmen	,	1)				