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 INDIVIDUAL - NAME/ADDRESS CHANGE FORM

## Complete the information below for each license, certification or registration you hold from DPOR.

- Changes to your legal name will affect all of the license(s) you hold with DPOR. Changes to DBA name will only affect your Real Estate license(s).
- For <u>Name Changes</u>, all of your current Real Estate license(s) not your pocket card <u>NO COPIES</u> MUST be obtained from your broker and attached to this application or this application will be returned to you without being processed.
- Individuals requesting a legal <u>Name Change</u> (not DBA name) must attach a copy of official documentation that verifies the name change. (e.g. divorce decree, court order, driver's license, Social Security Card, or U.S. Passport)
- Individuals requesting a legal <u>Name Change</u> AND currently hold <u>an existing DBA name</u>: All DBA names must match legal names. If the first or last name has changed, the DBA Name may need to be updated as well. \*See questions 6 & 7.
  - 1. What is the name on your *current* license?
    - A. Full Legal Name

	(Name as it appears on your license)								
	B. Doing Business As (DBA) name:								
	(If applicable)								
2.	Provide at least <u>one</u> of the following identification numbers*:								
	Social Security Number and/or								
	<u>Virginia</u> DMV Control Number								
	Enter the same identification number as used on examination, previous applications or licenses on file with the department.								
	* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the <u>Virginia</u> Department of Motor Vehicles.								
3.	Contact Numbers								
	Primary Telephone Alternate Telephone								
4.	Email Address								
Email address is considered a public record and will be disclosed upon request from a third party. The email address provided above will be used for your individual online profile with DPOR. It can <u>not</u> be used by any other individual license holder or other firms registered with DPOR or the Real Estate Board. The email address provided will be unique to this individual license.									
5.	List all license numbers and license types you hold from DPOR:								
	Virginia License Number								
	Virginia License Number								
	Virginia License Number License Type								
	Virginia License Number								
	Virginia License Number								
	Virginia License Number								
6.	<ul> <li>A. Are you applying to <u>change</u> your Legal Name?</li> <li>No If no, Skip to question #7. <li>Yes If yes, provide your <u>New</u> Legal Name: (As it appears on your government issued ID or other legal documentation.) </li> </li></ul>								
	Last (required)First (required)MiddleGeneration								

	vorce decree, co	ourt order, drive have an <u>existii</u> □ If no, Skip	r's license ng <b>DBA na</b> to questic	anied by a copy o , Social Security ( a <b>me</b> (as listed in q on #7. he must include th	Card, or U.S. pass uestion #1.B.)?	sport)		າe change (e.g.
				match the new lo DBA name, conti	•		dropped f	rom the license
7.	No 🗌 Yes 🗌	ng to <u>change</u> o If yes, what is t DBA Name		<b>oing Business A</b> BA Name?	s (DBA)" name?			
8.	No 🗌	ng to <u>change</u> y If yes, provide <sup>:</sup>	our addres	t name of your legal n ss (place of Resid ng information:		d in your professional	name (i.e. Jo	hn D., or J. Doe)
	RESIDENT	sical Address: IAL (PHYSICAL) SS REQUIRED not accepted)	City				State	Zip Code
9.	All <u>correspondence</u> from the board are mailed to the individual's <u>physical address</u> on record. Complete the following table if you would like to have your correspondence mailed to a <u>different address</u> : (The address(es) listed below will become the 'Mailing Address' for the related license(s).) No Yes If yes, provide your license number and address for <u>each</u> license type you hold from DPOR.							
		License Nu	umber		Ma	ailing Address		
		> All Real	Estate Lice	nse(s) are mailed o	directly to the Firm/S	Sole Proprietor.		
10. Sta	I certify that al herein.			this form is true a			zed to reque	est the changes
ple <u>A</u>	Signature						Date	
Staple <u>All Original</u> License(s) Here NO COPIES	· _			r <b>legal name</b> and/o ds - to this application			Real Estate	<u>license(s)</u>