Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-8506
www.dpor.virginia.gov



Virginia Auctioneers Board AUCTIONEER LICENSE BY RECIPROCITY APPLICATION Fee \$25.00

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.

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>	Visit our website to see which states have reciprocity agreements with the Virginia Auctioneers Board https://dpor.virginia.gov/Boards/Auctioneers/ . Current states with reciprocity agreements: Alabama, Florida, Georgia, Indiana, Kentucky, Louisiana Mississippi, North Carolina, Ohio, Pennsylvania, South Carolina, Tennessee, Texas, and West Virginia.						
>	Do you hold a <i>previously</i> issued license by Department of Professional and Occupational Regulation or from Virginia Auctioneers Board? No Yes If yes, provide your Virginia license number and expiration date below:	the					
	Virginia License Number Expiration Date						
1.	Full Legal Name (As it appears on your government issued ID or other legal documentation.)						
	Last (required) First (required) Middle Generat	ion					
	> Sole proprietors practicing under a fictitious name, trade or doing business as name, must indicate the name on the next line.						
	Fictitious or Trade Name						
	* If a Fictitious or Trade Name will be used, a copy of the certificate filed with the State Corporation Commission or locality pursual §59.1-69 of the Code of Virginia must be included with this application.	nt to					
	* If you will be practicing auctioneering through a corporation, partnership, or other business entity (other than a sole proprietorship), you required to submit an Auctioneer Firm License Application available from the Department of Professional and Occupational Regulation https://dpor.virginia.gov .						
2.	Provide at least one 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 is by the Commonwealth to provide a social security number or a control number issued by the <u>Virginia</u> Department of Motor Vehicles. 	sued					
3.	Date of Birth (Must be at least 18 years of age.)						
4.	Maiden or Former Name(s)						
5.	Mailing Address (PO Box accepted)						
	City State Zip Code						

OFFICE USE

ONLY

DATE

FEE

TRANS CODE

1021

ENTITY#

2907

ISSUE DATE

FILE #/LICENSE #

Street Address (PO Box <u>not</u> accepted) Check here if Street Address is the <u>same</u> as the Mailing Address listed above. PHYSICAL ADDRESS REQUIRED						
		City			State Zip Coo	
>	If you are using yo	ur <i>business</i> address, pleas	e include business	name, full street address and	d any floor or suite numb	
Con	itact Numbers					
	_	Primary Telephone		Alternate Telephone	Fax	
Ema	ail Address					
_			Email address is considered a public record and will be disclosed upon request from a third party.			
Do you hold a <u>current</u> auctioneer license, certification or registration issued by any state or territory of the Un States (outside of Virginia)?						
	,	,	nse by reciprocity	/. Complete the License by	/ Examination Applicat	
Yes If yes, complete the following table and attach an original Certification of Licensure/Letter of G Standing (dated within the last 60 days) from each state/jurisdiction.						
	State/J	Jurisdiction	License, Certific	cation or Registration Number	Expiration Date	
Virg N	inia after your licer	nse expired?		Board; did you perform ar	, auditorioum gradum	
	stration suspended		• •	or jurisdiction where license ith a disciplinary action (in		
	_	omplete the Disciplinary	Action Reporting	Form.		
A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of United States of any felony ? Any plea of nolo contendere shall be considered a conviction.						
	No ☐ Yes ☐ If v	yes, complete the Crimina	al Conviction Rep			
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D.	•	oon convicted or found -	uilty regardless		ion in any juriodiation	
		_		oorting Form. of the manner of adjudicati a of nolo contendere shall l	• •	
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By signing this application, you acknowledge that if you are not a Virginia resident, or move outside of Virginia while you hold a Virginia Auctioneer License, you understand that this application serves as a written power of attorney, whereby you appoint the Director of the Department of Professional and Occupational Regulation, and his/her successors in office, to be your true and lawful agent and attorney-in-fact, in your stead, upon whom all legal process against and notice to you may be served and who is hereby authorized to enter an appearance on your behalf in any case or proceedings arising out of the trade or profession practiced; and that by submitting this application you hereby agree that any lawful process against you which is duly served on said agent and attorney-in-fact shall be of the same legal force and validity as if served upon you.

- 13. By signing this application, I certify the following statements:
 - 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 including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
 - 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 authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.
 - I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 6, of the Code of Virginia and the Virginia Regulations Governing Auctioneers.

	Signature	Date
REQU □	UIRED ATTACHMENT: A completed Auctioneer Surety Bond Form must be submitt issued.	ed along with this application prior to a license being
	If a Fictitious or Trade Name will be used, a copy of the cer locality pursuant to §59.1-69 of the Code of Virginia.	tificate filed with the State Corporation Commission or
	Mail this application, along with your application	

Make checks payable to the *Treasurer of Virginia* or use the credit card payment form available at https://dpor.virginia.gov/FormsAndApplications to the following address:

> Department of Professional and Occupational Regulation 9960 Mayland Drive, Suite 400 Richmond, VA 23233-1485