

**Real Estate Board**  
**FIRM LICENSE APPLICATION**  
 Fee \$270.00

A check or money order payable to the TREASURER OF VIRGINIA,  
 or a completed credit card insert must be mailed with your application package.  
**APPLICATION FEES ARE NOT REFUNDABLE.**

**Sole Proprietor** (Broker-owned) businesses are not required to file this application.

1. Firm Name \_\_\_\_\_  
 2. Trade, "Doing Business As" (DBA) or Fictitious Name <sup>▲</sup> \_\_\_\_\_

▲ All **Sole Proprietorships** with DBA and Fictitious names must attach a copy of the certificate filed with the Clerk of the Court in the locality where the business will be conducted.

3. Select **one** of the following and provide the information below.

Business Federal Employer Identification Number (FEIN) <sup>❖</sup> [ ][ ] - [ ][ ][ ][ ][ ][ ][ ][ ][ ]  
Federal Employer Identification Number (12-3456789)

❖ State law requires every applicant, *who is not a sole proprietor*, to provide a federal employer identification number. *Sole proprietors (non-broker owned) must provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.*

*Sole Proprietor's* Social Security Number **or** [ ][ ][ ] - [ ][ ] - [ ][ ][ ][ ][ ]  
 *Sole Proprietor's* VA Department of Motor Vehicles Control Number <sup>\*</sup> Social Security or Virginia DMV Number (123-45-6789)

\* 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 Virginia Department of Motor Vehicles.

4. Type of business entity (select only **one**)

Sole Proprietorship (Non-Broker Owned)     General Partnership <sup>★</sup>     Other, please specify: \_\_\_\_\_  
 Limited Partnership <sup>♦</sup>     Corporation <sup>♦</sup>  
 Limited Liability Company <sup>♦</sup>     Association

State Corporation Commission Number: \_\_\_\_\_

♦ If your firm is a **corporation, limited liability company, or limited partnership**, your firm/trade name(s) must be registered with the Virginia State Corporation Commission (**including out of state businesses**). For additional information, contact the SCC at [www.scc.virginia.gov](http://www.scc.virginia.gov) or by phone at (804) 371-9733.

★ General Partnerships should attach recording data or a certificate of partnership issued by the Virginia State Corporation Commission (SCC).

5. Firm's Mailing Address (PO Box accepted) \_\_\_\_\_  
 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

6. Firm's Street Address **PHYSICAL ADDRESS REQUIRED** (PO Box not accepted) \_\_\_\_\_  
 \_\_\_\_\_

Check here if Street Address is the same as the Mailing Address listed above.

**If Principal Broker resides in Virginia, you must have a Virginia Address.**

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

BOARD USE ONLY	SCC	ISSUE DATE	ACTIVE	TRADE NAME REGISTERED	DATE
			No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>	
Office Use Only	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #
			1020		0226
					ISSUE DATE

7. Firm's E-mail Address \_\_\_\_\_  
 (This email address must be unique to this entity.)

8. Firm's Contact Numbers \_\_\_\_\_  
 Primary Telephone                      Alternative Telephone                      Fax

9. Is the real estate firm a **limited liability company**?  
 No   
 Yes  If yes, provide the following information for each member and managing member of the limited liability company.  
*\*Every **managing member** who actively participates in this firm's Virginia brokerage business must hold a license as a Virginia Real Estate Broker.*

Full Name (print name)	Member	Managing Member*	VA Real Estate License No. (if licensed). Otherwise provide Social Security No. or VA DMV Control No.	Actively Participate in VA business?
	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>		No <input type="checkbox"/> Yes <input type="checkbox"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>		No <input type="checkbox"/> Yes <input type="checkbox"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>		No <input type="checkbox"/> Yes <input type="checkbox"/>

10. Is the real estate firm a **corporation**?  
 No   
 Yes  If yes, provide the following information for each officer and Director from your corporation. *\*Every **officer** who actively participates in this firm's Virginia brokerage business must hold a license as a Virginia Real Estate Broker.*

Full Name (print name)	Officer's* Title or Director	VA Real Estate License No. (if licensed). Otherwise provide Social Security No. or VA DMV Control No.	Actively Participate in VA business?
			No <input type="checkbox"/> Yes <input type="checkbox"/>
			No <input type="checkbox"/> Yes <input type="checkbox"/>
			No <input type="checkbox"/> Yes <input type="checkbox"/>

11. Is the real estate firm a **sole proprietorship (non-broker owned) or partnership**?  
 No   
 Yes  If yes, provide the following information for each sole proprietor or partner from your partnership.  
*\*Every **sole proprietor (non-broker owned)/partner** who actively participates in this firm's Virginia brokerage business must hold a license as a Virginia Real Estate Broker.*

Full Name (print name)	Sole Proprietor	Partner* of Partnership	VA Real Estate License No. (if licensed). Otherwise provide Social Security No. or VA DMV Control No.	Actively Participate in VA business?
	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>		No <input type="checkbox"/> Yes <input type="checkbox"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>		No <input type="checkbox"/> Yes <input type="checkbox"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> Yes <input type="checkbox"/>		No <input type="checkbox"/> Yes <input type="checkbox"/>

12. Is the real estate firm an **association**?

No

Yes  If yes, provide the following information for each associate from your association. *\*Every associate who actively participates in this firm's Virginia brokerage business must hold a license as a Virginia Real Estate Broker.*

Full Name (print name)	Associate*	VA Real Estate License No. (if licensed). Otherwise provide Social Security No. or VA DMV Control No.	Actively Participate in VA business?
	No <input type="checkbox"/> Yes <input type="checkbox"/>		No <input type="checkbox"/> Yes <input type="checkbox"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/>		No <input type="checkbox"/> Yes <input type="checkbox"/>
	No <input type="checkbox"/> Yes <input type="checkbox"/>		No <input type="checkbox"/> Yes <input type="checkbox"/>

13. Firm's Principal Broker Name:

\_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Generation \_\_\_\_\_

14. Firm's Virginia Principal Broker Real Estate License Number:

0	2	2	5						
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DO NOT INCLUDE DASHES (1234567890)

15. Has the **Principal Broker** ever been subject to a disciplinary action taken by any (including Virginia) local, state or national regulatory body?

No

Yes  If yes, provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.

16. A. Has the firm's **Principal Broker** ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of a **misdemeanor involving moral turpitude, sexual offense, drug distribution or physical injury** within the past five years there being no appeal pending therefrom or the time for appeal having elapsed? *Any plea of nolo contendere shall be considered a conviction.*

No

Yes  If yes, list the misdemeanor conviction(s). Attach your original criminal history record<sup>\*</sup> and any other information you wish to have considered with this application (i.e., information on the status of incarceration, parole or probation; reference letters; documentation of rehabilitation; etc.). If necessary, you may attach a separate sheet of paper.

B. Has the firm's **Principal Broker** ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of **any felony** there being no appeal pending therefrom or the time for appeal having elapsed? *Any plea of nolo contendere shall be considered a conviction.*

No

Yes  If yes, list the felony conviction(s). Attach your original criminal history record<sup>\*</sup> and any other information you wish to have considered with this application (i.e., information on the status of incarceration, parole or probation; reference letters; documentation of rehabilitation; etc.). If necessary, you may attach a separate sheet of paper.

\* *Original criminal history records may be obtained by contacting the state police in the jurisdiction in which you were convicted. Virginia residents must obtain a complete criminal history record by obtaining a request form from the Department of State Police, Central Criminal Records Exchange, Post Office Box 27472, Midlothian, Virginia 23261-7472 or by contacting your local State Police Division. The address is available from your local police department.*

17. Has the **principal broker** ever violated the fair housing laws of any jurisdiction?

No

Yes  If yes, attach a certified copy of the final order, decree, case decision or conciliation agreement by a court or regulatory agency with lawful authority to issue such order, decree, decision or agreement.

18. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this application. I certify that I will notify the Department if the Principal Broker is subject to any disciplinary action or convicted of a felony or misdemeanor or fair housing violations (in any jurisdiction) prior to receiving the requested license. I certify that I have read, understood and complied with all the laws of Virginia under the provisions of Title 54.1, Chapter 21, *of the Code of Virginia* and the *Virginia Real Estate Board Regulations*.

Firm's Principal Broker's Signature:

\_\_\_\_\_ Date \_\_\_\_\_

**The Owner's Signature is required ONLY if the current Principal Broker did not sign above.**

Owner's Name \_\_\_\_\_  
Last First Middle Generation

Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_