Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-2039
www.dpor.virginia.gov



Real Estate Appraiser Board BUSINESS REGISTRATION APPLICATION Fee \$100.00

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

The Real Estate Appraiser Board Regulations require all business entities seeking to provide appraisal services shall register with the Real Estate Appraiser Board. All businesses, including sole proprietorships trading under a fictitious name, are required to register.

1.	Business/Sole Proprietor's Name							
2.	Trade (or Fictitious) Name							
3.	Federal Employer Identification Number							
	Sole Proprietor's Social Security No. *	_						
4.	Street Address (PO Box not accepted)							
	City, State, Zip Code							
5.	Mailing Address (PO Box accepted)							
	City, State, Zip Code							
6.	E-mail Address							
7.	Telephone & Facsimile Numbers	()	-	() -	·			
		Teleph	one	Facsimi	е			
8.	Type of business (check only one) Sole Proprietorship General Partnership Limited Partnership ◆ Association Limited Liability Company ◆ Corporation ◆							
	◆ Limited Partnerships, Limited Liability the Virginia State Corporation Commi							with
Licen	sing section use only: SCC Registration	No.		Issue Date	Acti	ve?	Y N	
	DATE FEE	CLASS OF FEE		LICENSE NUMBER		ISS	UE DATE	
OFFICE USE ONLY		32.50 0 22	400	_		.00		

9.	Virginia) to conduct							
	Yes							
	No If no, this application cannot be processed.							
	All companies and corporations must provi State Corporation Commission.	rtificate of Incorpora	ation issued by the					
	Out-of-state business entities must include a copy of the Certificate of Authority issued by the Corporation Commission Partnerships must attach a copy of their certificate of partnership issued by the Virgin Corporation Commission (SCC).							
	Business entities trading under <u>fictitious</u> names must attach a copy of the certificate filed with the of the court in the locality where business will be conducted.							
10.	. Enter the name and title of a principal member of your business management (a registered agent, the sole propried of a sole proprietorship, a partner of your partnership, an officer or director of an association, a manager of your lim liability company, or an officer of your corporation).							
	First Middle	Last	Gen (SR, JR, etc.)	Title				
11.	Manager's Address (PO Box accepted)							
	City, State, Zip Code							
12.	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.							
	Manager's Signature		Date					
	(Individual named in #10)							

^{*} 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.