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## COMMON INTEREST COMMUNITY BOARD

### Common Interest Community Manager Information Sheet

***ALL APPLICATIONS, FORMS, AND REGULATIONS OF THE COMMON INTEREST COMMUNITY BOARD ARE AVAILABLE ON THE WEB AT [http://www.dpor.virginia.gov/dporweb/cic\\_main.cfm](http://www.dpor.virginia.gov/dporweb/cic_main.cfm).***

All applicants must meet the current eligibility requirements at the time the completed application package is received at the Board office. Completed application packages must include all required documentation, verifications, and fees. All forms must be legible. A firm will be notified within 30 days of the board's receipt of an initial application if the application is incomplete. Incomplete applications will only be kept in the Board office for 12 months from the date of receipt by the Board. Firms that fail to complete the process within 12 months of receipt of the application in the Board's office must submit a new application and fee, along with all required documentation. (18 VAC 48-50-20)

### **BOARD REGULATIONS AND STATUTES**

Applicants for licensure are required to read and understand the *Common Interest Community Manager Regulations* (effective March 1, 2012) and Chapter 23.3 of Title 54.1 of the *Code of Virginia* prior to applying for licensure.

### **FEES**

Each application must be accompanied by the application fee of \$100, the \$25 recovery fund fee required pursuant to § 55-530.1.B of the *Code of Virginia*, and the annual assessment required by § 54.1-2349.A.1 of the *Code of Virginia*. The annual assessment is calculated by multiplying the gross receipts (as defined in 18 VAC 48-50-10 of the Board's regulations) by 0.0005. If the amount is \$10 or less, submit \$10. If the resulting amount is greater than \$10 but less than \$1,000, submit the actual calculated amount. If the amount is \$1,000 or more, submit \$1,000. Supporting documentation, which may include copies of audits, tax returns, financial statements, or other documentation that provide the actual receipts collected, must be submitted with the application as proof of gross receipts for the preceding year. If the maximum amount of \$1,000 is submitted, this supporting documentation is not necessary. Firms that had no gross receipts during the previous calendar year should submit a note of explanation with the application (i.e., new company, did not offer management services the previous year, etc.). (18 VAC 48-50-60 and 18 VAC 48-50-70; §55-530.1.B; §54.1-2349.A.1)

### **QUESTION 1**

All business entities that are required to register (including out-of-state businesses) and wish to conduct business in Virginia must register with the Virginia State Corporation Commission (including any trade/fictitious names) prior to applying for licensure with the Common Interest Community Board. The State Corporation Commission may be reached by dialing (800) 552-7945. Current registration with the State Corporation Commission will be verified by staff during the application review process; therefore, it is imperative that the company has a current registration under the name provided, if applicable. Provide the name of the firm as it is listed with the appropriate authority (i.e., State Corporation Commission or clerk of the court in the locality where the business will be conducted). To aid in the Board's review of the application, the applicant may include a copy of the certificate issued by the State Corporation Commission. Individuals will apply as a sole proprietor. (18 VAC 48-50-30.B)

## **QUESTION 2**

Sole proprietors and other firms that are trading under fictitious names must attach a copy of the certificate filed with the clerk of the court in the locality where business will be conducted. Business entities that are required to register with the State Corporation Commission should ensure that the trade or fictitious name has been properly registered with the State Corporation Commission. (18 VAC 48-50-30.B)

## **QUESTION 3**

The Federal Employer Identification Number or, in the case of a sole proprietor, the Social Security Number or control number issued by the Virginia Department of Motor Vehicles must be provided on the application. State law requires that 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. (§ 54.1-116.A)

## **QUESTIONS 4 AND 5**

Please provide the applicant's street and mailing address. A post office box cannot be listed for the street address but is acceptable for the mailing address. Please note that this may not be the address used for correspondence (see Question 11). (18 VAC 48-50-30.C)

## **QUESTIONS 6 AND 7**

Provide the e-mail and website addresses, if applicable, for the applicant.

## **QUESTION 8**

No further explanation necessary.

## **QUESTION 9**

In accordance with 18 VAC 48-50-30.C of the Board's regulations, the applicant must provide the address of the office from which the firm provides management services to Virginia common interest communities. This may or may not be the same address(es) provided in Questions 4 and 5. Only the address(es) of the main office that provide(s) management services to Virginia common interest communities need(s) to be provided. (18 VAC 48-50-30.C)

## **QUESTION 10**

Please check the one type of business entity that applies to the applicant.

## **QUESTION 11**

Each applicant is required to name a responsible person who is an employee of the firm and serves as the individual ensuring compliance with Chapter 23.3 of Title 54.1 of the Code of Virginia and will be the point of contact for all mailings and correspondence from the Board or Department. This address may or may not be the same as those listed in Questions 4, 5, and 9. If the responsible person for the firm changes once the license is issued, the firm must submit a *Change of Personnel Form*. It is imperative that the person and address listed here are current as all correspondence, including licenses, will be sent to that person. (18 VAC 48-50-10; 18 VAC 48-50-30.M)

## **QUESTION 12**

The names, positions (i.e., Sole Proprietor, President, Secretary, Partner, etc.), and mailing address must be provided for all principals of the firm. If the firm is registered with the State Corporation Commission, the individual(s) listed on the application should match those filed with the State Corporation Commission.

## **QUESTION 13**

Select one of the three methods by which the firm can qualify for licensure. Each method is followed by additional instructions. In addition, if the second option (ii) is selected, the applicant must proceed to Question 14 to supply information regarding the firm's supervisory employee, officer, manager, owner, or principal (qualifying individual). The first and third options (i and iii) direct the applicant to skip

Questions 14 and 15 and proceed to Question 16, as a supervisory employee, officer, manager, owner, or principal of the firm is not required to meet training/experience requirements in order for the firm to qualify for licensure. If the third option is selected, the applicant must obtain and submit an original certification or letter of good standing from another state, territory, or jurisdiction in which the applicant is currently licensed, certified, or registered. In addition, the requirements for issuance of such license, certification, or registration must be substantially equivalent to the Board's requirements for a common interest community manager license. The certification/letter of good standing must include the type of license, certificate, or registration held; current status of license; any disciplinary actions; how and when license, certificate, or registration was issued; and original signature and seal from the state/jurisdiction. (18 VAC 48-50-30.I; 18 VAC 48-50-30.J; 18 VAC 48-50-37.A)

#### **QUESTION 14**

For applicants that do not hold an Accredited Association Management Company designation or are not applying via reciprocity, the applicant must certify that at least 50% of persons who have principal responsibility for management services to a Virginia common interest community meet one of the following criteria:

- Hold an active designation as a Professional Community Association Manager and have provided management services for a period of 12 months immediately preceding application; OR
- Have two years of experience in providing management services, with a minimum of 12 months of experience having been gained immediately preceding application, and one of the following:
  - Active designation as a Certified Manager of Community Associations by the National Board of Certification for Community Association Managers;
  - Active designation as an Association Management Specialist by the Community Associations Institute; or
  - Successful completion of a Board-approved comprehensive or introductory training program.

*Effective July 1, 2012, employees of the common interest community manager who have principal responsibility for management services provided to a common interest community or who have supervisory responsibility for employees who participate directly in the provision of management services to a common interest community shall, within two years after employment with the common interest community manager, hold a certificate as a certified principal or supervisory employee issued by the board or shall be under the direct supervision of a certified principal or supervisory employee.*

#### **QUESTION 15**

For applicants that do not hold an Accredited Association Management Company designation or are not applying via reciprocity, a supervisory employee, officer, manager, owner, or principal of the firm must be named. This qualifying individual for the firm must meet training and experience requirements as provided in 18 VAC 48-50-30.J of the Board's Common Interest Community Manager Regulations. Each option also includes specific instructions for documentation that must be supplied with the application. Please note that the fourth option (iv) requires the completion of a *Comprehensive Training Program Equivalency Form* in addition to the *Experience Verification Form*. Because of the detailed review required to determine whether the coursework submitted is equivalent to the completion of a Board-approved comprehensive training program, it may take four to six weeks for your application to be reviewed.

Regarding completion of the *Experience Verification Form*, please complete the form in accordance with the instructions provided on the form. The experience must be verified by an individual who is knowledgeable of your work during the time period being verified. Such individual may be the qualifying individual's supervisor or a principal of the firm, a client, or staff member or governing board member of an association managed by the qualifying individual. Depending upon the amount of experience requiring verification and the length of time each individual verifier can appropriately verify, multiple forms may be needed. All forms should be returned in a sealed envelope to the applicant or qualifying individual for inclusion with the *Common Interest Community Manager Application* form. The envelope should not be opened prior to submitting it to the Board office. If the verifier opts to submit the completed *Experience Verification Form* directly to the Board office, it will be matched with the

appropriate *Common Interest Community Manager Application* when it is received in the Board office. (18 VAC 48-50-30.J)

#### **QUESTION 16**

Section 54.1-2346.D of the *Code of Virginia* requires that the applicant hold a blanket fidelity bond or employee dishonesty insurance policy. In accordance with Section 54.1-2346.D of the *Code of Virginia*, the common interest community manager must be covered against losses resulting from theft or dishonesty committed by the officers, directors, and persons employed by the common interest community manager. Such bond or insurance policy shall include coverage for losses of clients of the common interest community manager resulting from theft or dishonesty committed by the officers, directors, and persons employed by the common interest community manager. Such bond or insurance policy shall provide coverage in an amount equal to the lesser of \$2 million or the highest aggregate amount of the operating and reserve balances of all associations under the control of the common interest community manager during the prior fiscal year. The minimum coverage amount shall be \$10,000. The Board strongly recommends that the applicant requests the insurance carrier include a provision to notify the Board of cancellation or nonrenewal. Having that provision does not release the applicant from the responsibility of notifying the Board of cancellation, amendment, expiration, or any other change in the bond or insurance policy in accordance with 18 VAC 48-50-150.D. (18 VAC 48-50-30.E; § 54.1-2346.D)

#### **QUESTION 17**

No further explanation necessary.

#### **QUESTION 18**

No further explanation necessary.

#### **QUESTIONS 19, 20, 21, AND 22**

This information must be provided for the applicant, responsible person, and all principals of the firm. An explanation and supporting documentation must be provided for all affirmative answers. (18 VAC 48-50-30.D, G, and H)

#### **QUESTIONS 23 AND 24**

The individual signing the application must be authorized to bind the applicant. The individual should thoroughly read, understand, and verify the accuracy of the attestations in Questions 23 and 24 prior to signing the application.

#### **REQUIRED DOCUMENTATION**

- Copy of blanket fidelity bond form or employee dishonesty insurance policy coverage form that shows, at a minimum, the provider of the bond/insurance policy, the amount of the coverage, the expiration date of the bond/insurance policy, and a summary of what is covered.
- Copy of trade or fictitious name certificate, if applicable.
- Documentation of gross receipts for the previous calendar year, if applicable.
- Copy of documentation showing evidence of the active AAMC designation, if applicable.
- Copy of documentation showing that the supervisory employee, officer, manager, owner, or principal of the firm (qualifying individual) has successfully completed a training program approved by the Board, if applicable.
- Original certification/letter of good standing from another state, territory, or jurisdiction in which the applicant is currently licensed, certified, or registered.
- Completed *Experience Verification Form(s)* documenting the qualifying individual's management services experience, if applicable.
- Completed *Comprehensive Training Program Equivalency Form*, if applicable, and all supplemental documentation for all coursework that is to be considered by the Board.
- Copy of documentation for affirmative responses to questions 19, 20, 21 AND 22 on this application.

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Common Interest Community Board  
 COMMON INTEREST COMMUNITY MANAGER  
 LICENSE APPLICATION

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.**

➔ The following fees are required for licensure:

<b>Application Fee</b>	<u>\$ 100.00</u>
<b>Annual Assessment</b> (§ 54.1-2349.A.1 of the Code of Virginia) Enter amount from Calculation Chart on page 9.	(+) \$ _____
<b>Recovery Fund Fee</b> (§ 55-530.1.B of the Code of Virginia)	(+) <u>\$ 25.00</u>
<b>TOTAL AMOUNT ENCLOSED</b>	(=) \$ _____

**COMMON INTEREST COMMUNITY MANAGER:**

1. Business Entity/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. Website Address \_\_\_\_\_
8. Telephone & Facsimile Numbers ( ) - ( ) - ( ) -  
 Primary Phone Secondary Phone Facsimile
9. Address of office from which the firm provides management services to Virginia common interest communities:
  - a. Street Address (PO Box not accepted) \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_
  - b. Mailing Address (PO Box accepted) \_\_\_\_\_  
 City, State, Zip Code \_\_\_\_\_
10. Type of business entity (select only one)
 

Sole Proprietorship <input type="checkbox"/>	Limited Partnership <input type="checkbox"/>	Limited Liability Company <input type="checkbox"/>
General Partnership <input type="checkbox"/>	Association <input type="checkbox"/>	Corporation <input type="checkbox"/>

OFFICE USE ONLY	DATE	FEE	CLASS OF FEE	0 5 0 1	LICENSE NUMBER	ISSUE DATE
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11. **Responsible person.**

In accordance with 18 VAC 48-50-30.M of the Common Interest Community Manager regulations, each applicant shall designate a **responsible person** who is an employee of the firm. Complete the following for the individual selected to be the responsible person for this firm. **Please note that the responsible person ensures compliance with Chapter 23.3 of Title 54.1 of the Code of Virginia and the Board’s regulations and will be the point-of-contact for all mailings and correspondence from the Board or Department.**

- a. Name \_\_\_\_\_
- b. Social Security No. \* 

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- c. Street Address (PO Box not accepted) \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_
- d. Mailing Address (PO Box accepted) \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_

12. **Principal(s) of the firm.**

List the firm’s principals below (sole proprietor, partners of a general partnership, general partner of a limited partnership, officers/directors of an association, managers (or members if no managers) of a limited liability company, or officers of a corporation). Attach a separate sheet with the information below if additional space is needed.

Individual’s Full Legal Name	Principal Position	Address

13. Please indicate the method by which the applicant is seeking licensure. **Check only one.**

- i.  Active designation as an Accredited Association Management Company (AAMC) by the Community Associations Institute.
  - ❖ Proof of active AAMC designation must be submitted with this application. **Proceed to Question 16.**
- ii.  In lieu of an active AAMC designation, the firm has at least one supervisory employee, officer, manager, owner, or principal of the firm (qualifying individual) who has completed training and/or experience pursuant to 18 VAC 48-50-30.J of the Board’s regulations involved in all aspects of the management services offered and provided by the firm.
  - ❖ **Proceed to Question 14.**
- iii.  The applicant holds an active, current license, certificate, or registration in another state, the District of Columbia, or any other territory or possession of the United States and the requirements and standards under which the license, certificate, or registration was issued are substantially equivalent to the Board’s requirements for a common interest community manager license.
  - ❖ The applicant must provide a **certification/letter of good standing** from any other state/jurisdiction (a copy of the license, certificate, or registration is not acceptable) where the applicant holds a license, certificate, or registration to provide common interest community management services. The certification/letter of good standing must include the type of license; current status of license; any disciplinary actions; how and when license was issued; and original signature and seal from the state/jurisdiction. **Proceed to Question 16.**

14. As the firm does not hold the AAMC designation and is not applying via reciprocity, 18 VAC 48-50-30.J.2. of the Board’s regulations requires the applicant to certify that at least 50% of persons who have principal responsibility for management services to a Virginia common interest community meet one of the following criteria:

- Hold an active designation as a Professional Community Association Manager and have provided management services for a period of 12 months immediately preceding application; **OR**
- Have two years of experience in providing management services, with a minimum of 12 months of experience having been gained immediately preceding application, and one of the following:
  - Active designation as a Certified Manager of Community Associations by the National Board of Certification for Community Association Managers;

- o Active designation as an Association Management Specialist by the Community Associations Institute; or
- o Successful completion of a Board-approved comprehensive or introductory training program.

The applicant has read, understands, and certifies that the applicant meets the criteria contained in 18 VAC 48-50-30.J.2 of the Board's regulations.

Yes

No  IF NO, THE APPLICATION CANNOT BE PROCESSED

15. **Supervisory employee, officer, manager, owner, or principal (qualifying individual).**

A. As the firm does not hold the Accredited Association Management Company designation, the applicant must have one supervisory employee, officer, manager, owner, or principal of the firm (qualifying individual) who has completed training and/or experience pursuant to 18 VAC 48-50-30.J of the Board's regulations involved in all aspects of the management services offered and provided by the firm. Please provide the following information regarding the qualifying individual of the firm.

- i. Qualifying Individual's Name \_\_\_\_\_
- ii. Title \_\_\_\_\_
- iii. Street Address (PO Box not accepted) \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_
- iv. Mailing Address (PO Box accepted) \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_

B. Which of the following training/experience requirements contained in 18 VAC 48-50-30.J of the Board's regulations does the qualifying individual named above meet? (**Check only one.**) In addition, the documentation following the selected item must be submitted with this application.

- i.  Holds an active designation as a Professional Community Association Manager by Community Associations Institute.  
❖ A copy of the certificate of completion or other documentation showing evidence of completion is required.
- ii.  Has successfully completed a comprehensive training program as described in 18 VAC 48-50-250.B as approved by the Board, **and** has at least three years of qualifying experience\*.  
❖ A copy of the certificate of completion or other documentation showing evidence of completion of an approved comprehensive training program **and** a completed *Experience Verification Form* that documents the required qualifying experience.
- iii.  Has successfully completed an introductory training program as described in 18 VAC 48-50-250.A as approved by the Board **and** has at least five years of qualifying experience\*.  
❖ A copy of the certificate of completion or other documentation showing evidence of completion of an approved introductory training program **and** a completed *Experience Verification Form* that documents the required qualifying experience.
- iv.  Has not completed a board-approved training program but is requesting board consideration of the credentials obtained through documented course work that is equivalent to a board-approved comprehensive training program **and** has at least ten years of qualifying experience\*.  
❖ A completed *Comprehensive Training Program Equivalency Form* **and** a completed *Experience Verification Form* that documents the required qualifying experience.

\* *Qualifying experience* is experience providing management services, the quality of which demonstrates to the Board that the individual is competent to have supervisory responsibility or principal responsibility for management services.

16. Applicants must **submit evidence** of a blanket fidelity bond or employee dishonesty insurance policy in accordance with § 54.1-2346(D) of the Code of Virginia. Proof of current bond or insurance policy must be submitted in order to obtain the license. Bond or insurance policy shall provide coverage in an amount equal to the lesser of \$2 million or the highest aggregate amount of the operating and reserve balances of all associations under the control of the common interest community manager during the prior fiscal year. The minimum coverage amount shall be \$10,000. **The applicant certifies that the aggregate amount of the bond or insurance policy complies with the requirements of § 54.1-2346(D).**

a. Check one:  Blanket fidelity bond  Employee dishonesty insurance policy

b. Bond/Policy Amount: \$ \_\_\_\_\_ Expiration Date: \_\_\_\_\_

17. The applicant has read, understands, and confirms that the applicant meets the requirements of § 54.1-2346 and Board Regulation 18 VAC 48-50-30.

Yes

No  **IF NO, THE APPLICATION CANNOT BE PROCESSED**

18. Does the applicant have a current or expired common interest community manager license, certification or registration in another state or jurisdiction?

No

Yes  If yes, complete the following table.

Business Name	State/Jurisdiction	License, Certification or Registration No.	Expiration Date

19. Has the applicant, responsible person, or any principals of the firm been subject to a disciplinary action imposed by any (including Virginia) local, state or national regulatory body?

No

Yes  If yes, please 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.

20. Has the applicant, responsible person, or any principals of the firm ever been convicted in any jurisdiction of **any felony**, or been convicted within the last three years of **any misdemeanor**? Any guilty plea or plea of nolo contendere must be disclosed on this application. Do not disclose violations that were adjudicated as a minor in the juvenile court system.

No

Yes  If yes, list the misdemeanor and/or felony conviction(s). Attach the original criminal history record(s); a certified copy of the final order(s), decree(s), or case decision(s) by a court or regulatory agency with lawful authority to issue such order, decree, or case decision; and any other information to be considered with this application (e.g., information on the status of incarceration, parole or probation; reference letters; documentation of rehabilitation). If additional space is needed, attach a separate sheet of paper.

*Certified copies of court records may be obtained by writing to the Clerk of the Court in the jurisdiction in which you were convicted. The address is available from your local police department. 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 from the Virginia State Police. You may obtain a request form from the Department of State Police, Central Criminal Records Exchange, Post Office Box 27472, Richmond, Virginia 23261-7472 or by contacting your local State Police Division.*

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21. During the past seven years, has the applicant, responsible person, or any principals of the firm had any outstanding judgments, past-due tax assessments; defaults on bonds; or pending or past bankruptcies?

No

Yes  **IF YES, THE APPLICANT MUST PROVIDE ALL RELEVANT INFORMATION RELATED TO THESE MATTERS, AND SPECIFICALLY SHALL PROVIDE ALL RELEVANT FINANCIAL INFORMATION RELATED TO PROVIDING MANAGEMENT SERVICES AS DEFINED IN § 54.1-2345 OF THE CODE OF VIRGINIA. Failure to provide adequate documentation may result in a delay in the processing of your application.**

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22. During the past seven years, have any principals of the firm who individually or collectively own more than a 50% equity interest in the firm or were equity owners holding, individually or collectively, a 10% or greater interest in any other entity licensed by any agency of the Commonwealth of Virginia, been the subject of any adverse disciplinary action, or surrendered a license, certificate, or registration in connection with any disciplinary action, in any jurisdiction or by any board, or administrative body?

No

Yes  **IF YES, THE APPLICANT MUST PROVIDE ALL RELEVANT INFORMATION RELATED TO THESE MATTERS.**

**Failure to provide adequate documentation may result in a delay in the processing of your application.**

23. By signing this application, I hereby certify to the Board (i) that the applicant is in good standing and authorized to transact business in Virginia; (ii) that the applicant has established a code of conduct for the officers, directors, and persons employed by the applicant to protect against conflicts of interest; (iii) that the applicant provides all management services pursuant to written contracts with the associations to which such services are provided; (iv) that the applicant has established a system of internal accounting controls to manage the risk of fraud or illegal acts; and (v) that an independent certified public accountant reviews or audits the financial statements of the applicant at least annually in accordance with standards established by the American Institute of Certified Public Accountants or by any successor standard-setting authorities.

24. I 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 firm, the responsible person, or any principals of the firm are subject to any disciplinary action; surrender a license in connection with a disciplinary action; fail to satisfy any judgments or restitution orders; or convicted of any felony or misdemeanor charges (in any jurisdiction) prior to the receipt of the requested license. I certify that I am authorized to bind the applicant herein. I certify that I have read, understand, and verified the accuracy of the foregoing statements and answers. I also certify that I understand, and have complied with, all the laws of Virginia under the provisions of Title 54.1, Chapter 23.3 of the *Code of Virginia* and all regulations of the *Common Interest Community Board*.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Signatory

\_\_\_\_\_  
Title

### Annual Assessment Calculation Chart

1.	<b>Manager's gross receipts from common interest community management services during the preceding calendar year.</b> Unless the maximum annual assessment amount of \$1,000 is submitted, supporting documentation must accompany this application. This may include copies of audits, tax returns, financial statements, or other documentation that provide the actual receipts collected related to management services during the preceding calendar year.	\$
2.	<b>0.05% of amount in Item 1 above.</b> <b>Multiply amount in Item 1 by <u>0.0005</u></b> Example: Gross receipts are \$50,000. \$50,000 X 0.0005=\$25	\$
3.	<b>If the amount in Item 2 is less than \$10, please insert \$10 on Line 2 on page 1.</b>	
4.	<b>If the amount in Item 2 is greater than \$10 and less than \$1,000, please insert amount on Line 2 on page 1.</b>	
5.	<b>If the amount in Item 2 is greater than \$1,000, please insert \$1,000 on Line 2 on page 1.</b>	

# Optional Association Information

-Provide the name and registration number of all communities managed by the applicant. Please attach a separate-sheet with the information below if additional space is needed.

Name of Common Interest Community	Registration Number of Community <i>(The first 4 digits of the 10-digit number are provided)</i>
	0550
	0550
	0550
	0550
	0550
	0550
	0550
	0550
	0550
	0550
	0550
	0550
	0550
	0550
	0550

\* 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.