Reset Form Print Form

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

Department of Professional and Occupational Regulation

Real Estate Board
SALESPERSON ACTIVATE/TRANSFER APPLICATION
Fee $90.00

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.

Select one of the following:

X	Action
☐	*Activation* of Salesperson License
☐	*Transfer* of Salesperson License

- You must hold a ***non-expired*** Virginia Real Estate Salesperson License to use this application. If your license has expired, you must RENEW or REINSTATE your license prior to submitting this application.
- If you are transferring to another Branch Office under the same Firm you must use the Branch Affiliation Application. Do not complete this application.

1. Enter your current Virginia Real Estate Salesperson License number and expiration date below.

   Virginia License Number ☐☐☐☐☐☐☐☐☐☐ Expiration Date _____

2. Legal Name _____ (Last) _____ (First) _____ (Middle) _____ (Generation)

3. Provide at least one of the following identification numbers✳:

   ☐ Social Security Number *and/or* ☐☐☐ - ☐☐ - ☐☐☐☐

   ☐ *Virginia* Department of Motor Vehicles Control Number ☐☐☐☐☐☐☐☐☐

   DO NOT INCLUDE DASHES (1234567890)

   ➢ 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 Virginia Department of Motor Vehicles.

4. Applicant Mailing Address
   (PO Box accepted)

   _____
   _____ City _____ State _____ Zip Code

5. Applicant Street Address
   RESIDENTIAL (PHYSICAL)
   ADDRESS REQUIRED
   (PO Box not accepted)

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

   _____
   _____ City _____ State _____ Zip Code

6. Applicant's Contact Numbers

   _____ Primary Telephone _____ Alternate Telephone _____ Fax

7. Applicant's E-mail Address

   _____
   E-mail address is considered a public record and will be disclosed upon request from a third party.

OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
			3020		0225	

8. Firm/Sole Proprietorship information with whom your license will be *active*:

A. Firm/Sole Proprietorship Name

B. Trade, "Doing Business As" (DBA) or Fictitious Name

C. Firm/Sole Proprietor Virginia Real Estate License Number

DO NOT INCLUDE DASHES (1234567890)

D. Firm/Sole Proprietor Mailing Address

City State Zip Code

E. Firm/Sole Proprietor Street Address
PHYSICAL ADDRESS REQUIRED
(PO Box not accepted)

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

City State Zip Code

F. Firm/Sole Proprietor Contact Numbers

Primary Telephone Alternate Telephone Fax

G. Firm/Sole Proprietor E-mail Address

H. Firm/Sole Proprietor Principal Broker's Name

Last First Middle Generation

I. Principal Broker's Virginia Real Estate License Number

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9. Will you be affiliating with a Branch Office of the firm listed above?

No ☐ If no, go to question #10.

Yes ☐ If yes, provide the following Branch Office information:

A. Branch Office Virginia Real Estate License Number

DO NOT INCLUDE DASHES (1234567890)

B. Branch Office Mailing Address

City State Zip Code

C. Branch Office Contact Numbers

Primary Telephone Alternate Telephone Fax

D. Branch Office Supervising Broker's Name

Last First Middle Generation

E. Branch Supervising Broker's VA Real Estate License Number

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10. Have you ever been subject to a disciplinary action taken by any (including Virginia) local, state or national regulatory body?

No ☐

Yes ☐ If yes, complete a Disciplinary Action Reporting Form.

11. A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any felony?

No ☐

Yes ☐ If yes, complete a Criminal Conviction Reporting Form for any new criminal conviction that has not been reported to the Board.

B. Have you been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of a misdemeanor involving fraudulent or dishonest acts, sexual offense, non-marijuana drug distribution, or battery within the past five years?

No ☐

Yes ☐ If yes, complete a Criminal Conviction Reporting Form for any new criminal conviction that has not been reported to the Board.

12. Have you ever violated a fair housing law in any jurisdiction of the United States?

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.

By signing this application, you acknowledge that if you are not a Virginia resident, or move outside of Virginia while you hold a Virginia Real Estate 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:

- 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. Furthermore, 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 including, but not limited to, any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
- I authorize the Department of Professional and Occupational Regulation (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 and 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 21 of the *Code of Virginia* and the *Virginia Real Estate Regulations.*
- If I am transferring my license, I affirm I have notified my current broker of the fact that I am leaving his/her firm.

Applicant's Signature _____ Date _____

Broker's Statement continued on the next page.

14. For all applicants who will be affiliated with a current licensed firm/sole proprietorship:

Broker's Statement (to be completed by either the principal or supervising broker with *signatory authority* who will be responsible for the applicant's real estate activities)

I, _____ authorize _____
Print Name of Principal or Supervising Broker — Applicant's Name

to apply to transfer his/her license with the real estate firm listed on this application. I affirm I verified the applicant's license has not expired, I have reviewed the application as well as the answers provided by the applicant and the application is complete. I certify that I will actively supervise and train the licensee during the period the licensee is under my supervision and I hereby assume responsibility effective as of the date indicated below for the above-named licensee pursuant to Title 54.1, Chapter 21, of the *Code of Virginia* and the *Real Estate Board Regulations.*

Principal or Supervising Broker's Signature _____ Date _____

Principal Broker ☐
Supervising Broker ☐

Broker's Virginia Real Estate License Number | | | | | | | | | | |
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The activating/transferring salesperson must first sign and date this application prior to the Principal/Supervising Broker/Sole Proprietor signing and dating this application.

Applications cannot be processed and licenses activated if signatures are not placed on the application in the proper order.

ATTACHMENTS: (Check the attachments included with this application)

☐ Disciplinary Action Report Form(s) and all attachments. (See Question #10)

☐ Criminal Conviction Reporting Form(s) and all attachments. (see Question #11)