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

**Real Estate Board**
**FIRM PRINCIPAL BROKER/OFFICER CHANGE FORM**
**No Fee Required**

➤ Please include any supplemental applications and fees that may be required for the new principal broker (i.e., *Broker License Application*, *Concurrent Broker Application* or *Activate/Transfer License Application*).

1. Firm/Sole Proprietor's Name _____

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

3. Firm/Sole Proprietor's Virginia Real Estate License Number: ☐☐☐☐☐☐☐☐☐☐
   DO NOT INCLUDE DASHES (1234567890)

4. Mailing Address (PO Box accepted) _____
   City _____ State _____ Zip Code _____

5. Contact Numbers
   Primary Telephone _____ Alternate Telephone _____ Fax _____

6. Firm/Sole Proprietor's Email Address _____
   Email address is considered a public record and will be disclosed upon request from a third party.
   - ➤ The email address provided above will be used for your Firm's online profile with DPOR. It can **not** be used by any other individual's license holder or other firms registered with DPOR or the Real Estate Board. The email address provided will be unique to this firm's license.

7. Are you applying to change to firm's **Principal Broker**?
   - No ☐ If no, skip to question #8.
   - Yes ☐ If yes, provide the following information for the **current** Broker and the **new** Broker:

   A. Firm's **current** Principal Broker Name: (As it appears on your government issued ID or other legal documentation.)
   Last (required) _____ First (required) _____ Middle _____ Generation _____

   B. **Current** Principal Broker's Virginia Real Estate License Number: ☐☐☐☐☐☐☐☐☐☐
   DO NOT INCLUDE DASHES (1234567890)

   C. Will the **current** Principal Broker become an Associate broker for this firm?
   - No ☐ If no, the **current** Principal Broker's license will become inactive.
   - Yes ☐ If yes and the current Principal Broker is to retain his/her 'Signature Authority', complete and return the Signature Authority Application.

   D. Firm's **new** Principal Broker Name: (As it appears on your government issued ID or other legal documentation.)
   Last (required) _____ First (required) _____ Middle _____ Generation _____

| BOARD USE ONLY | SCC NO. | ISSUE DATE | ACTIVE | TRADE NAME REGISTERED | DATE |
|---|---|---|---|---|---|
| | | | No ☐ Yes ☐ | No ☐ Yes ☐ | |

E. Is the **new** Principal Broker currently an Associate Broker with this firm?

No ☐ If no, provide the **new** Principal Broker's Social Security or VA DMV Control number✳:

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

◯ ***Virginia*** DMV Control Number ☐☐☐☐☐☐☐☐☐

Yes ☐ If yes, provide the **new** Principal Broker's Virginia license number:

☐☐☐☐☐☐☐☐☐☐ DO NOT INCLUDE DASHES (1234567890)

✳ 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.

F. Which of the following **Broker Application(s)** have been included to complete this application package for the **new** Principal Broker? (Select only **one**)

☐ If you answered "yes" to question 7, part E, an additional application is NOT required.

☐ *Broker License Application* (New applicants and upgrades only)

☐ *Concurrent Broker Application* (Existing licensee working for more than one firm)

☐ *Activate/Transfer License Application* (Existing licensee who are activating or transferring their license)

8. Are you applying to change the firm's **Member(s), Officer(s), Partner(s), or Associate(s)**?

No ☐ If no, skip to question #9.

Yes ☐ If yes, answer the following questions in regards to the firms type of business**:**

➢ **Any change to the Firm's Officer(s) must be updated with the State Corporation Commission. For additional information, contact the SCC at www.scc.virginia.gov or by phone at (804) 371-9733.**

A. 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 an Individual's Social Security No. VA DMV Control No., or Company/Trust Tax ID No. | Actively Participate in VA business? |
|---|---|---|---|---|
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |

***Required Attachment:*** *Attach a copy of the Operating Agreement for the Limited Liability Company; **not** the Articles of Organization.*

B. 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 ☐ Yes ☐ |
| | | | No ☐ Yes ☐ |
| | | | No ☐ Yes ☐ |
| | | | No ☐ Yes ☐ |
| | | | No ☐ Yes ☐ |
| | | | No ☐ Yes ☐ |
| | | | No ☐ Yes ☐ |
| | | | No ☐ Yes ☐ |
| | | | No ☐ Yes ☐ |
| | | | No ☐ Yes ☐ |

C. 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 **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 ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | No ☐ Yes ☐ | | No ☐ Yes ☐ |

***Required Attachment:*** *Attach a copy of the Firm's Partnership Agreement and a copy of the Certificate of Partnership issued by the State Corporation Commission (SCC).*

D. 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 ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | | No ☐ Yes ☐ |
| | No ☐ Yes ☐ | | No ☐ Yes ☐ |

9. 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.
   - 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 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*.

***Current*** Principal Broker's Signature _____ Date _____
Signature of Individual listed in #7.A.

***New*** Principal Broker's Signature _____ Date _____
Signature of Individual listed in #7.D.

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

Owner's Name

_____ _____ _____ _____
Last (required) First (required) Middle Generation

Owner's Signature _____ Date _____

**ATTACHMENTS:** (Check **all** attachments that have been included with your application package.)

Required attachment if making a change to the Existing Principal Broker:

- ☐ **Signature Authority Application** will need to be completed and returned if the existing Principal Broker will be retaining his/her 'signature authority'. (Question #7.C.)
- ☐ Broker Application - ***Broker License Application***, ***Concurrent Broker Application*** or ***Broker - Activate/Transfer license Application***. At least one of the following application must be included for changes to the Principal Broker, if applicable. (Question #7.F.)

Required attachment if making a change to the firm's **Member(s), Officer(s), Partner(s), or Associate(s):**

- ☐ Any change to the Firm's Officer(s) must be updated with the State Corporation Commission (SCC). (Question #8)
- ☐ Limited Liability Companies must provide a copy of the Operating Agreement and any addendum's (***not*** the Articles of Organization) for verification purposes. (Question #8.A.)
- ☐ General Partnerships must attach Partnership Agreement and Certificate of Partnership issued by the SCC. (Question #8.C.)