Commonwealth of Virginia
Department of Professional and Occupational Regulation
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485
(804) 367-8526
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Department of Professional and Occupational Regulation

Real Estate Board
SUPERVISING BROKER CERTIFICATION FORM
No Fee Required

This form must be completed by a Supervising Broker who is located more than 50 miles from the Branch Office and there are licensees who regularly conduct business assigned to the Branch Office.

1. Supervising Broker _____ _____ _____ _____
   Last First Middle Generation
2. Supervising Broker's Virginia Real Estate License Number | 0 | 2 | 2 | 5 | | | | | | |
3. Firm Name _____
4. Firm's Virginia Real Estate License Number: | 0 | 2 | 2 | 6 | | | | | | |
5. Branch Office Virginia Real Estate License Number: | 0 | 2 | 2 | 6 | | | | | | |
6. Branch Office Street Address _____
   _____
   _____ _____ _____
   City State Zip Code
7. Branch Office Contact Numbers _____
   Primary Telephone
8. I, the undersigned, certify that I have complied with and am in compliance with the requirements of the Board's regulation 18 VAC 135-20-160.D.

   Principal Broker's Signature _____ Date _____

   Supervising Broker's Signature _____ Date _____

THIS FORM IS REQUIRED TO BE MAINTAINED BY THE SUPERVISING BROKER AT THE BRANCH OFFICE FOR THREE YEARS.
DO NOT SEND THIS FORM TO THE REAL ESTATE BOARD.