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



Real Estate Board SUPERVISING BROKER CERTIFICATION FORM No Fee Required

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

1.	Supervising Broker							
		Last	F	irst	Middle		Generation	
2.	Supervising Broker's Virginia Real Estate License Number					CLUDE DASI	HES (1234567890)	
3.	Firm Name							
4.	J						HES (1234567890)	
5.	Branch Office Virginia Real Estate License Number:					OT INCLUDE DASHES (1234567890)		
6.	Branch Office Street	Address						
			City			State	Zip Code	
7.	Branch Office Conta	ct Numbers						
8.	I, the undersigned, 18VAC135-20-165.	Primary Telephone d, certify that I have complied with the requirements of the Virginia 5.				al Estate	Fax Board Regulation	
	Principal Broker's Sig	gnature _				_ 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.