

**STATE OF WEST VIRGINIA
REAL ESTATE COMMISSION
300 CAPITOL STREET, SUITE 400
CHARLESTON, WV 25301
304.558.3555
<www.wvrec.org>**

**APPLICATION FOR BRANCH OFFICE
\$100.00 Fee Required**

Date of Issue _____
License # _____

This application is to be used only by a licensed real estate broker who desires to establish a branch office.

I. COMPANY INFORMATION

Company Name _____ Incorporated ____ Yes ____ No
Address _____ Phone _____

Broker's Name _____ SS# _____

II. BRANCH OFFICE INFORMATION

Designated Manager _____
Address _____ Phone _____

I, _____, being the licensed broker for the above named company do hereby certify that the foregoing application has been completed in its entirety to the best of my knowledge and belief.

Broker's Signature

STATE OF _____

COUNTY OF _____

Taken, subscribed and sworn before me this _____ day of _____, 20____

My Commission expires _____

Notary Public