



# Department of Commerce

Division of Real Estate & Professional Licensing  
77 South High Street, 20th Floor  
Columbus, Ohio 43215-6133

Please visit our website at [www.com.ohio.gov/real](http://www.com.ohio.gov/real)

614 | 466-4100

Fax: 614 | 644-0584

TTY/TDD: 800 | 750-0750

John R. Kasich, Governor

Jacqueline T. Williams, Director

Anne M. Petit, Superintendent

## REAL ESTATE

## BRANCH OFFICE APPLICATION

- This form is interactive. You may, before printing, type your responses directly onto the form. Otherwise, this form must be typewritten or printed legibly in black ink.
- Incomplete applications and applications that are filled out incorrectly will be returned for correction.
- A check or money order, made payable to the Ohio Division of Real Estate, in the amount of \$15.00, must accompany each application. Cash will not be accepted.
- A principal broker of the real estate company applying for a branch office must sign this application.
- A separate application is required for each branch office.

FOR DIVISION USE ONLY
FILE NUMBER

APPLICANT INFORMATION			
COMPANY FILE NUMBER	COMPANY NAME	DOING BUSINESS AS (D.B.A.) NAME	
MAIN BUSINESS ADDRESS			BUSINESS PHONE
CITY	STATE	ZIP CODE + 4	

BRANCH OFFICE INFORMATION		
NAME OF PRINCIPAL BROKER/MANAGEMENT LEVEL LICENSEE IN CHARGE OF BRANCH OFFICE	FILE NUMBER	
BRANCH OFFICE ADDRESS	BRANCH PHONE	
CITY	STATE	ZIP CODE + 4

### THE APPLICANT MUST COMPLETE THE FOLLOWING CERTIFICATION

I certify that all of the statements on this application and all of the attached materials are complete and accurate. I understand that any false statement on this form or any of the attached materials may subject me to criminal prosecution and the loss of my Ohio real estate license.

NAME OF PRINCIPAL BROKER OF REAL ESTATE COMPANY (PRINT) \_\_\_\_\_

SIGNATURE OF PRINCIPAL BROKER \_\_\_\_\_

DATE \_\_\_\_\_

BROKER FILE NUMBER \_\_\_\_\_