

Real Estate **Broker/Managing Broker Name/Address Change**

You can use this form to inform us of a change in your name or home address. Do not use this form to change a firm name or address.

Online: https://professions.dol.wa.gov

Or mail or email this completed form to:

Real Estate Licensing Department of Licensing PO Box 9021 **Olympia, WA 98507**

Email: RealEstate@dol.wa.gov

For questions or language help call: (360) 664-6500 or (360) 664-6488

What are you requesting? (check all that apply)

□ Name change (active licensees must have Designated broker/Branch manager signature) ☐ Home address change

Applicant information

TYPE or PRINT Name (as it appears on your license, if applicable)						
IF NAME CHANGE-New name (as you want it to appear on your license)						
Date of birth	License number	(Area code) Phone number	Email			
New home address, if applicable (Street address, City, State, ZIP code)						

Legal background

Answer the following Answer the questions below. If you answer "Yes," attach a detailed explanation.

Within the last 5 years, in this state or any other jurisdiction, have you had any action (fine, suspension, revocation, censure, surrender, etc.) taken against any professional or occupational license, certification, or permit held by you?	□ No
Within the last 5 years, in this state or any other jurisdiction, have you defaulted, or been convicted of, or entered a plea of no contest to a gross misdemeanor or felony crime?	
(Don't include traffic convictions.).	🗌 No

I declare under penalty of perjury under the law of Washington that the foregoing is true and correct.

Date and place

TYPE or PRINT Name

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Applicant signature (if name change, use new name)

Name changes only-Your designated broker/branch manager signature is required (not needed for inactive licensees). If not signed by the designated broker or branch manager, submit a copy of the delegation authority.

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TYPE or PRINT Name			
X			
Designated broker/Branch manager signature	Date		

Firm name

License number

27003-SUPPORTING