



## Real Estate Firm Assumed Name Application

Firms can request an assumed name license, change an existing assumed name license, or obtain an additional assumed name.

Prior to applying you must:

1. Check to see if the name you want is available before submitting your application. Obtain **assumed name** approval from Real Estate Regulatory. **The request must be submitted by the person who is endorsed as the Designated Broker of the firm.** Send a brief email with your name as it is on your license, contact information, firm name, and desired assumed name to [reregulatory@dol.wa.gov](mailto:reregulatory@dol.wa.gov). You will receive notification within 5 to 7 business days.
2. Register the approved firm's new assumed name with DOR by completing and filing a Business License Application. You can contact the Business License Service at **1-800-451-7985** or visit [www.dor.wa.gov](http://www.dor.wa.gov).
3. Submit a copy of your Washington Business License showing the desired assumed name listed as a trade name of your Business License.
4. Apply online: <https://professions.dol.wa.gov>  
Or mail this completed form with a check or money order for **\$304** (payable to the Department of Licensing) to:  
**Real Estate Licensing**  
**Department of Licensing**  
**PO Box 3917**  
**Seattle, WA 98124-3917**  
**Do not use FedEx or UPS** (they will not deliver to PO boxes).  
Licenses are available for self-printing with an online account.  
If you want us to print and mail your license add a \$5 print fee for each copy to your payment.  
☐ \$0 self-print license online.  
☐ \$5 each. DOL print and mail license. Quantity \_\_\_\_\_ Total \$ \_\_\_\_\_

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

**All assumed name licenses expire when your firm license expires.**

### Firm information—Incomplete applications will not be processed

TYPE or PRINT Firm name (as it appears on your license)		UBI/UBI Business ID/UBI Location ID (16 digits)	
Assumed name requested		Check one <input type="checkbox"/> New <input type="checkbox"/> Change	
Mailing address (Address or PO Box, City, State, ZIP code)			
Physical address, if different (Street address, City, State, ZIP code)			

### Designated broker information

TYPE or PRINT Designated broker name		10-digit phone number	
Email	Firm website		

## Certification

Answer the following

Have you included a copy of the Firm's Washington Business License with the requested assumed name listed as a Trade Name? . . . . . ☐ Yes ☐ No  
Applications without it are incomplete and cannot be processed.

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

\_\_\_\_\_  
TYPE or PRINT Name

**X**

\_\_\_\_\_  
Designated broker signature

\_\_\_\_\_  
Date and place

**Providing any false information in this application may be cause for denial, suspension, or revocation of your professional license in the State of Washington.**

**NOTICE:** The Department of Licensing may enter your real estate firm's licensed office location at reasonable times to inspect the records that you are required to keep by the statutes and rules that govern the license for which you are applying. It is your responsibility as a licensee to cooperate with an audit or an investigation by providing the Department with the requested documents and a written explanation of the matter contained in a complaint upon the Department's request.