



**Real Estate Board**  
**SALESPERSON - UNIVERSAL LICENSE RECOGNITION (ULR) APPLICATION**  
**Fee \$230.00**

**All applicants must pass the Virginia Real Estate Board examination prior to applying for this license.**  
**Contact PSI for all exam information at [www.psiexams.com](http://www.psiexams.com).**  
 ➤ DPOR will require an individual seeking a professional or occupational licensure or government certification pursuant to the Code of Virginia, [§54.1-205](#) to pass an examination specific to relevant state laws.

**A check or money order payable to the TREASURER OF VIRGINIA,  
 or a completed [credit card insert](#) must be mailed with your application package.**  
**APPLICATION FEES ARE NOT REFUNDABLE.**

1. Have you ever held a license and/or certificate issued by the Virginia Department of Professional and Occupational Regulation?  
 No  Yes
2. Legal Name \_\_\_\_\_  
Last First Middle Generation
3. Professional Name (if applicable) \_\_\_\_\_  
First or last name of your legal name must be included in your professional name. (i.e. John D., or J. Doe)
4. Provide at least **one** of the following identification numbers <sup>\*</sup>:  
 Social Security Number **and** \_\_\_\_\_ - \_\_\_\_\_  
 **Virginia** Department of Motor Vehicles Control Number  
DO NOT INCLUDE DASHES (1234567890)  
 ➤ Enter the same identification number as used on examination, previous applications or licenses on file with the Department.  
 \* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.
5. Date of Birth \_\_\_\_\_ (Must be at least 18 years of age.)  
MM/DD/YYYY
6. Applicant's Mailing Address \_\_\_\_\_  
(PO Box accepted)  
City State Zip Code
7. Applicant's Street Address \_\_\_\_\_  
**RESIDENTIAL (PHYSICAL)  
 ADDRESS REQUIRED**  
(PO Box not accepted)  
 Check here if Street Address is the same as the Mailing Address listed above.  
City State Zip Code
8. Applicant's Contact Numbers \_\_\_\_\_  
Primary Telephone Alternate Telephone
9. Applicant's E-mail Address \_\_\_\_\_  
E-mail address is considered a public record and will be disclosed upon request from a third party.

OFFICE USE ONLY	DATE	FEE	TRANS CODE <b>1030</b>	ENTITY #	FILE #/LICENSE # <b>0225</b>	ISSUE DATE
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10. Applicants who hold a **current** license/certificate:
- A. Do you hold a **current** (non-Virginia) Salesperson license or certificate issued by a regulatory board or government entity?
- No  If no, you do not qualify for the Universal license. You may apply using the Board's Salesperson License Application.
- Yes
- B. Do you hold a current license in one of the following neighboring states: District of Columbia, Maryland, North Carolina, Kentucky, Tennessee, or West Virginia?
- No  If no, continue to question 10C.
- Yes  If yes, skip to question 10E.
- C. Have you held this license/certificate for at least 3 years? (excluding licenses/certificates issued by District of Columbia, Maryland, North Carolina, Kentucky, Tennessee, or West Virginia)
- No  If no, you do not qualify for the Universal license. You may apply using the Board's Salesperson License Application.
- Yes
- D. Did your current state or your state of original licensure/certification require you to pass an examination?
- No  If no, you do not qualify for the Universal license. You may apply using the Board's Salesperson License Application.
- Yes  If yes, did that state require you to complete any education, training and/or experience requirements to obtain this license/certificate?
- No  If no, you do not qualify for the Universal license. You may apply using the Board's Salesperson License Application.
- Yes
- E. Complete the following table and include all **current** and **expired** licenses and/or certification issued from any state, territory, possession, or jurisdiction of the United States. A *Certification of Licensure/Letter of Good Standing* must be submitted from each state board/regulatory body directly to the Real Estate Board and must be dated within the last 60 days from each jurisdiction.

State/Jurisdiction	License, Certification or Registration Number	Did you pass an examination?	Expiration Date
		Yes <input type="checkbox"/>	

- ◆ *Certifications of Licensure/Letter of Good Standing, prepared by the state board or regulatory body must include: 1) the license/certification/registration number; 2) the initial date of licensure; 3) the expiration date of the license or renewal date; 4) the means of obtaining licensure (i.e. exam, reciprocity, etc.) and the minimum requirement that were met to qualify for licensure; and 5) all closed disciplinary actions resulting in a violation or undetermined finding.*

Certification can be emailed to [reboard@dpor.virginia.gov](mailto:reboard@dpor.virginia.gov), faxed to 877-340-9616 or mailed to:  
 Real Estate Board, 9960 Mayland Drive, Suite 400, Richmond, VA 23233-1485

F. Do you have any unresolved complaints or investigations pending against you at the time you submitted this application?

No

Yes  If yes, please give a brief description of this complaint/pending investigation:

11. Are you applying for an **active** license status with a licensed real estate firm or sole proprietor?

No  If no, skip to question #14. You will be issued an **inactive** license.

Yes

12. Firm/Sole Proprietorship information with whom your license will be **active**:

A. Firm/Sole Proprietorship Name

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B. Trade, "Doing Business As" (DBA) or Fictitious Name

➤ All **sole proprietorships** with fictitious names must attach a copy of the certification filed with the Clerk of the Court in the locality where business will be conducted.

C. Firm's/Sole Proprietor's Virginia Real Estate License Number

DO NOT INCLUDE DASHES (1234567890)

D. Firm/Sole Proprietor's Mailing Address

\_\_\_\_\_  
City State Zip Code

E. Firm/Sole Proprietor's Street Address  Check here if Street Address is the same as the Mailing Address listed above.

**PHYSICAL  
ADDRESS REQUIRED**  
(PO Box not accepted)

\_\_\_\_\_  
City State Zip Code

F. Firm/Sole Proprietor's Contact Numbers

\_\_\_\_\_  
Primary Telephone Alternate Telephone Fax

G. Firm/Sole Proprietor's E-mail Address

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H. Firm/Sole Proprietor's Principal Broker's Name

\_\_\_\_\_  
Last First Middle Generation

I. Principal Broker's Virginia Real Estate License Number

DO NOT INCLUDE DASHES (1234567890)

13. Will you be affiliating with a Branch Office of the firm listed above?

No  If no, go to question #14.

Yes  If yes, provide the following Branch Office information:

A. Branch Office Virginia Real Estate License Number

DO NOT INCLUDE DASHES (1234567890)

B. Branch Office Mailing Address \_\_\_\_\_

AS PRINTED ON BRANCH  
LICENSE

City

State

Zip Code

C. Branch Office Contact Numbers

Primary Telephone

Alternate Telephone

Fax

D. Branch Office Supervising Broker's Name

Last

First

Middle

Generation

E. Branch Supervising Broker's VA Real Estate License Number

DO NOT INCLUDE DASHES (1234567890)

14. Have you ever been subject to a **disciplinary action** taken by any (including Virginia) local, state or national regulatory body?

No

Yes  If yes, complete a [Disciplinary Action Reporting Form](#).

15. A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **felony**? Any plea of nolo contendere shall be considered a conviction.

No

Yes

B. Have you been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of a **misdemeanor** involving moral turpitude, sexual offense, non-marijuana drug distribution or physical injury within the past five years? Any plea of nolo contendere shall be considered a conviction.

No

Yes

C. If you answered "yes" to either question 15.A or 15.B, complete the following table for each conviction\*:

State/Jurisdiction	Conviction*	Type of Conviction	Date of Conviction	Date of Conviction	Status (check all those that apply)
		<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor			<input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole
		<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor			<input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole
		<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor			<input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole
		<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor			<input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole
		<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor			<input type="checkbox"/> Incarcerated <input type="checkbox"/> On Probation <input type="checkbox"/> On Parole

\* A Conviction includes any local, county, state or federal misdemeanor and felony convictions (including moving traffic violations), and all military and foreign convictions. A guilty verdict by judge or jury, a plea of guilty, or a plea of nolo contendere (or "no contest"), convictions as a minor (under 18 years of age) **if tried as an adult** are also considered convictions.

**DO NOT DISCLOSE** any violations adjudicated as a minor in the juvenile court system, a convictions pardoned, set aside, reversed, expunged, pending disposition, adjudication withheld, deferred judgment or otherwise rendered inoperative.

16. All applicants for initial licensure are required to submit a set of fingerprints for the purpose of conducting a search of the state and national fingerprint-based criminal history record. Have you submitted a set of your fingerprints?

No  If no, applicants must submit their fingerprint completed by a Board approved vendor. Check out our website for more information here - [https://www.dpor.virginia.gov/Real\\_Estate/FieldPrint - How To.pdf](https://www.dpor.virginia.gov/Real_Estate/FieldPrint_How_To.pdf). Schedule your appointment today at <https://fieldprintvirginia.com/>.

Yes  If yes, once the results of the fingerprints are received by the Board, a completed license application must be received by the Board within 45 calendar days. If this application is not received by the board within 45 days, the applicant will be required to resubmit their fingerprints again.

By signing this application, you acknowledge that if you are not a Virginia resident, or move outside of Virginia while you hold a **Virginia Real Estate** License, you understand that this application serves as a written power of attorney, whereby you appoint the Director of the Department of Professional and Occupational Regulation, and his/her successors in office, to be your true and lawful agent and attorney-in-fact, in your stead, upon whom all legal process against and notice to you may be served and who is hereby authorized to enter an appearance on your behalf in any case or proceedings arising out of the trade or profession practiced; and that by submitting this application you hereby agree that any lawful process against you which is duly served on said agent and attorney-in-fact shall be of the same legal force and validity as if served upon you.

17. By signing this application, I certify the following statements (as indicated by **placing my initials** next to each statement):

\_\_\_\_\_ I will notify the Board of any changes to the information provided in this application prior to receiving the requested license including, but not limited to, any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).

\_\_\_\_\_ I authorize the Department of Professional and Occupational Regulation (Department) to verify information concerning me or any statement in this application from any person, or any source the Department may contact. I also agree to present any credentials or documents required and requested by the Department.

\_\_\_\_\_ I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.

\_\_\_\_\_ I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 21 of the *Code of Virginia* and the *Virginia Real Estate Regulations*.

\_\_\_\_\_ The foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this application. Furthermore, I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.

\_\_\_\_\_ I have a high school diploma or GED and a good reputation for honesty, truthfulness, and fair dealing, and am competent to transact the business of real estate broker or real estate salesperson in such a manner as to safeguard the interests of the public.

\_\_\_\_\_ I understand that even if the Board issues a license based on this application, this application will be incomplete if the Virginia Central Criminal Records Exchange (CCRE) notifies the Board that the submitted fingerprints cannot be processed for any reason. I agree to complete the application by submitting new fingerprinting through an approved vendor within 21 days of being notified by the Board that the CCRE was unable to process my fingerprints.

Applicant's Signature <sup>★</sup> \_\_\_\_\_ Date \_\_\_\_\_

★ Electronic signatures must include a unique identifier or the separate signature verification page must be included with the application.



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18. **For all applicants who will be affiliated with a current licensed firm/sole proprietorship:**  
**Broker's Statement** (to be completed by either the principal or supervising broker with signatory authority who will be responsible for the applicant's real estate activities) - broker must sign after the applicant.

I, \_\_\_\_\_ authorize \_\_\_\_\_  
Print Name of Principal or Supervising Broker Applicant's Name

to apply for a license as a real estate *salesperson* with the real estate firm listed on this application; and I hereby assume responsibility for the licensee pursuant to Title 54.1, Chapter 21, of the *Code of Virginia* and the *Real Estate Board Regulations*. I affirm I have reviewed the application as well as the answers provided by the applicant and the application is complete.

Principal or Supervising Broker's Signature <sup>★</sup> \_\_\_\_\_ Date \_\_\_\_\_

Principal Broker  Broker's Virginia Real Estate License Number \_\_\_\_\_  
 Supervising Broker  DO NOT INCLUDE DASHES (1234567890)

★ Electronic signatures must include a unique identifier or the separate signature verification page must be included with the application.

**ATTACHMENTS:** (Check the attachments included with this application)

- Original Certification(s) of Licensure/Letter(s) of Good Standing dated within 60 days of application receipt. Certifications of Licensure/Letters of Good Standing are only good for 60 days following application receipt. (see Question #10.C.)
- Disciplinary Action Reporting Form and all required attachments. (see Question #14)

OFFICE USE ONLY	DATE	FEE	TRANS CODE 1030	ENTITY #	FILE #/LICENSE # 0225	ISSUE DATE
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