

**Real Estate Board
 INDIVIDUAL - NAME/ADDRESS CHANGE FORM**

Complete the information below for each license, certification or registration you hold from DPOR.

- Changes to your **legal name** will affect all of the license(s) you hold with DPOR. Changes to **DBA name** will only affect your Real Estate license(s).
- Individuals requesting a legal **Name Change** (not DBA name) must attach a copy of official documentation that verifies the name change. (e.g. divorce decree, court order, driver's license, Social Security Card, or U.S. Passport)
- Individuals requesting a legal **Name Change** AND currently hold **an existing DBA name**: All DBA names must match legal names. If the first or last name has changed, the DBA Name may need to be updated as well. *See questions 6 & 7.

1. What is the name on your **current** license?

A. Full Legal Name _____
(Name as it appears on your license)

B. Doing Business As (DBA) name: _____
(If applicable)

2. Provide at least **one** of the following identification numbers*:

Social Security Number and/or

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Virginia DMV Control Number

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➤ 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.

3. Contact Numbers

<small>Primary Telephone</small>	<small>Alternate Telephone</small>

4. Email Address

Email address is considered a public record and will be disclosed upon request from a third party.

- The email address provided above will be used for your individual online profile with DPOR. It can **not** be used by any other individual license holder or other firms registered with DPOR or the Real Estate Board. The email address provided will be unique to this individual license.

5. List **all** license numbers and license types you hold from DPOR:

Virginia License Number	<table border="1" style="border-collapse: collapse; width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td> </tr> </table>													License Type _____
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6. A. Are you applying to change your **Legal Name**?

No If no, Skip to question #7.

Yes If yes, provide your **New** Legal Name: (As it appears on your government issued ID or other legal documentation.)

<small>Last (required)</small>	<small>First (required)</small>	<small>Middle</small>	<small>Generation</small>

- Individual name change must be accompanied by a copy of official documentation that **verifies** the name change (e.g. divorce decree, court order, driver's license, Social Security Card, or U.S. passport)
- Marriage license/certificates are not proof of legal name change. Proof must be one of the official documents noted above.

B. Do you have an existing **DBA name** (as listed in question #1.B.)?

No If no, Skip to question #7.

Yes If yes, the DBA name must include the first or last name of the new legal name.

- **IF** the DBA name does not match the new legal name, the DBA name will be dropped from the license record. To **change or add** a DBA name, continue to the next question.

7. Are you applying to change or add a "**Doing Business As (DBA)**" name?

No

Yes If yes, what is the **New** DBA Name?

DBA Name _____

First or last name of your legal name must be included in your professional name (i.e. John D., or J. Doe)

8. Are you applying to change your **address** (place of Residence)?

No

Yes If yes, provide the following information:

New Physical Address: _____

RESIDENTIAL (PHYSICAL)

ADDRESS REQUIRED

(PO Box not accepted)

APT/Unit # _____

City _____

State _____

Zip Code _____

9. All **correspondence** from the board are mailed to the individual's physical address on record. Complete the following table if you would like to have your correspondence mailed to a different address:

(The address(es) listed below will become the 'Mailing Address' for the related license(s).)

No

Yes If yes, provide your license number and address for each license type you hold from DPOR.

License Number	Mailing Address

- All Real Estate **License(s)** are mailed directly to the Firm/Sole Proprietor.

I certify that all information provided on this form is true and accurate, and that I am authorized to request the changes herein.

Signature _____

Date _____

10 Staple All Original License(s) Here
NO COPIES