

BRANCH OFFICE REFERENCE NUMBER	REFERENCE NUMBER OF CORPORATION, PARTNERSHIP OR EMPLOYING BROKER	BRANCH OFFICE SUPERVISOR REFERENCE NUMBER	CASH RECEIPT NUMBER	REC BO
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THE ABOVE BLOCKS ARE FOR REAL ESTATE COMMISSION USE ONLY

CHECK APPROPRIATE BOXES

NEW BRANCH OFFICE \$150.00

CHANGE OF BRANCH
OFFICE SUPERVISOR \$50.00

NO PERSONAL CHECKS ACCEPTED

**APPLICATION FOR
REAL ESTATE
BRANCH OFFICE**

**NEW JERSEY DEPARTMENT OF
BANKING AND INSURANCE
FOR LICENSING SERVICES BUREAU - REAL ESTATE
PO BOX 474
TRENTON, NJ 08625-0474**

FOR LICENSING SERVICES BUREAU - REAL ESTATE USE ONLY

EFFECTIVE DATE -- PROCESSOR DATE --

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REFERENCE NUMBER OF BRANCH OFFICE (IF KNOWN)									

REFERENCE NUMBER OF CORPORATION, PARTNERSHIP OR EMPLOYING BROKER (IF KNOWN)									

NAME OF CORPORATION OR TRADE NAME OF EMPLOYING BROKER OR PARTNERSHIP (IF ANY)																																																																																																			
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NAME OF CORPORATION OR TRADE NAME OF EMPLOYING BROKER OR PARTNERSHIP (IF ANY) (CONTINUED)																																																																																																			
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NAME OF EMPLOYING BROKER OR BROKER OF RECORD

MAIN OFFICE ADDRESS (STREET)

MAIN OFFICE ADDRESS (STREET OR P.O. BOX)

MAIN OFFICE ADDRESS (SUITE NUMBER, ROOM NUMBER)

MAIN OFFICE CITY

STATE

ZIP CODE + 4

MAIN OFFICE COUNTY

MAIN OFFICE TELEPHONE NUMBER

INSTRUCTIONS

1. **All branch office supervisors must be licensed as real estate brokers/salespersons.**
2. Each application must be accompanied by one certified check, money order, broker business account check or cashier's check made payable to "State Treasurer of New Jersey"
3. Anyone submitting a dishonored check in connection with an application for a Real Estate License is subject to a New Jersey Real Estate Commission administrative penalty of \$500.
- 4.) A change of branch office address is considered a new branch. Complete this form, submit a check in the amount of \$150, and return current branch office license for termination.

ADDRESS OF BRANCH OFFICE FOR WHICH APPLICATION IS MADE

Grid for address line 1

BRANCH OFFICE ADDRESS (STREET)

Grid for address line 2

BRANCH OFFICE ADDRESS (STREET OR P.O. BOX)

Grid for address line 3

BRANCH OFFICE ADDRESS (SUITE NUMBER, ROOM NUMBER)

Grid for address line 4

BRANCH OFFICE CITY

STATE

ZIP CODE + 4

Grid for city

Grid for state and zip code

BRANCH OFFICE COUNTY

BRANCH OFFICE TELEPHONE NUMBER

BRANCH OFFICE INFORMATION - CHECK APPROPRIATE BOX

Is this a franchise office? If "Yes", attach copy of franchise agreement.

YES

NO

Input box for YES

Input box for NO

We hereby certify to the following:

- 1. The office described herein will be open to the public during normal business hours;
2. As required by N.J.S.A. 45:15-12 and N.J.A.C. 11:5-6.1(a), there will be displayed on the exterior of the branch office a legible sign...
3. Is this office located in a private residence?
4. The branch office supervisor named herein will supervise the real estate brokerage activities...
5. All of the information provided in this application is true and correct...

Input box for YES

Input box for NO

Input box for YES

Input box for NO

Input box for YES

Input box for NO

Input box for YES

Input box for NO

Input box for YES

Input box for NO

We are aware that if any of the information hereon is false, we are subject to punishment.

I am aware that this Branch Office is PROHIBITED BY LAW from engaging in any brokerage activity, unless and until is authorized to do so by the New Jersey Real Estate Commission.

Grid for reference number

REFERENCE NUMBER
BRANCH OFFICE SUPERVISOR
(IF KNOWN)

Grid for date

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DATE WHEN NEW BRANCH OFFICE SUPERVISOR WILL TAKE PERSONAL CHARGE OF THIS BRANCH OFFICE (NOT APPLICABLE TO NEW BRANCH OFFICES)

PRINT NAME OF BRANCH OFFICE SUPERVISOR (LAST NAME, FIRST NAME, MI)

SIGNATURE OF BRANCH OFFICE SUPERVISOR

DATE

PRINT NAME OF EMPLOYING BROKER OR BROKER OF RECORD

SIGNATURE NAME OF EMPLOYING BROKER OR BROKER OF RECORD

DATE