

CANNON BUILDING 861 SILVER LAKE BLVD., SUITE 203 DOVER, DELAWARE 19904-2467

STATE OF DELAWARE REAL ESTATE COMMISSION

TELEPHONE: (302) 744-4500 FAX: (302) 739-2711 WEBSITE: <u>DPR.DELAWARE.GOV</u> EMAIL: <u>customerservice.dpr@delaware.gov</u>

STATEMENT OF EMPLOYING BROKER OF RECORD

INSTRUCTIONS

• The employing Broker of Record for the office where you will be employed completes this form.

APPLICANT IDENTIFYING INFORMATION Full Name: Last First Middle		
REAL ESTATE EMPLOYMENT - Information abo	out the real estate office where the applican	nt will be employed.
Main Office/Branch Office Permit Number:		
Office Name:		
Office Location Address:		
City	State	Zip
Printed Broker of Record Name:		
Delaware Broker License for the office location list	red above: RB-	
STATEMENT OF EMPLOYING BROKER OF RE	CORD - Complete and sign the following s	tatement.
☐ I affirm that the applicant named above wi issuance of his or her license.	Il be affiliated with my office as a real estate	e salesperson or associate broker upon
☐ I affirm that the office named above has a	n active office permit in Delaware or other s	state.
BROKER OF RECORD SIGNATURE:		Date:

INCOMPLETE DOCUMENTS WILL NOT BE ACCEPTED.