



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 the Firm name as it appears on the license, the Firm license number, your name and contact information and the desired assumed name to 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.
3. Submit a copy of the Department of Revenue (DOR) Washington Business License showing the desired assumed name listed as a trade name of your Business License and the name approval email from RE Regulatory
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 New Change | |
| Physical address (Street address, City, State, ZIP code) | | | |
| Firm business email | | Firm business license number | |

Designated broker information

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



Certification

Answer the following

- | | | |
|---|-----|----|
| 1. Have you included a copy of the Firm's Washington Business License with the requested assumed name listed as a Trade Name? | Yes | No |
| 2. Have you included the email with the name approval? | Yes | No |

Applications without the two required documents 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.