

**KENT COUNTY ASSOCIATION OF REALTORS®**  
860 SILVER LAKE BLVD, SUITE 150, DOVER, DE 19904  
**REAL ESTATE OFFICE APPLICATION**

Office Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Office Fax: \_\_\_\_\_

Broker of Record: \_\_\_\_\_

Broker's License #: \_\_\_\_\_

Corporate Tax ID (EIN): \_\_\_\_\_

Office License #: \_\_\_\_\_

Office Contact (DR): \_\_\_\_\_

Office Contact Manager: \_\_\_\_\_

Email Address (DR): \_\_\_\_\_

Website: \_\_\_\_\_

Branch Type (Check One):     Main     Branch     Single

Non-Member Salesperson Count: \_\_\_\_\_

Are you currently a member of another REALTOR® Board/Association?

Yes     No    **If yes, name of the Primary REALTOR® Board/Association:** \_\_\_\_\_

Has your real estate license, in this or any other state, ever been suspended or revoked?

Yes     No    **If yes, please attach an explanation and specify the place(s) and date(s) of such action.**

\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership if granted. I also agree that, if accepted for membership in the Board, I shall pay the dues and fees as from time to time established.

**KCAR REAL ESTATE OFFICE APPLICATION FEE: \$50**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date