

BROKER VERIFICATION FORM

State of Utah Department of Commerce Division of Real Estate

Please provide this form to each Broker with whom the applicant has affiliated during the five years proceeding application and have each Broker complete (type or neatly print), sign (notarized) and seal this **form** in an envelope with the Broker's signature across the seal and submit to the Utah Division of Real Estate at the address below.

Applicant:		License No		
Physical Address:				
Mailing Address:				
Phone:		Fax:		
I,	, the unders	signed to verify that		,
who is an applicant for a br	oker license has been licensed as an a	agent with me for the period of	of	
to				
During that time the applica	ant worked an average of	_ hours per week.		
While affiliated with this br	okerage the applicant closed	transactions, representing	ng a dollar volume of \$	•
While affiliated with this br	okerage the applicant devoted the following	llowing percentage of time in	the following categories	:
	Commercial			
		1 , 6 —		
I () would () would	I not recommend the applicant as a	Principal Broker for the Stat	te of Utah.	
	11	1		
Comments:				
I hereby certify that the info	ormation provided is true and correct.			
Signature		Dat	te	
State of	County of	Anne	eared before me this	
Juic 01	,, County of			•
information listed above is	,,, true to the best of his/her knowledge.		-	na says mai me
miormanon iisteu above is	a ac to the best of ms/ner knowledge.	(110taly)		