



Government of the Virgin Islands
of the United States

Department of Licensing and Consumer Affairs

Golden Rock Shopping Center
3000 Estate Golden Rock, Suite 9
St. Croix, VI 00820-4311
Telephone: 340.773.2226
Facsimile: 340.773.6982

Administrative Complex
"The Battery"
St. John, VI 00830
Telephone: 340.693.8036
Facsimile: 340.776.6989

Property & Procurement Building
8201 Subbase, Suite 1
St. Thomas, VI 00802-5826
Telephone: 340.774.3130
Facsimile: 340.776.8303

Attach 3
2x2 photo of
applicant here

VIRGIN ISLANDS REAL ESTATE COMMISSION
APPLICATOIN FOR REAL ESTATE BROKER'S LICENSE

NON REFUNDABLE APPLICATION FEE: \$300.00

Real Estate Broker's Examination Attorney

The non-refundable application fee of \$300.00 must be submitted with the application to include background check.

(\$50.00 Application Fee and \$250.00 initial deposit for background check)

Attorneys licensed to practice in the Virgin Island are exempt from the examination and background check.

Part I

1. Full Name _____
2. Father's Name _____
3. Mother's Maiden Name _____
4. Physical Address _____
5. Mailing Address _____
6. E-Mail Address _____
7. Business Telephone () _____
8. Home Telephone () _____
9. Birth Date _____
10. Birth Place _____
11. Citizenship _____
12. Naturalized: yes no
13. Social Security Number _____
- 13a. Email: _____
14. Virgin Islands Resident yes no If yes, how long? _____
15. Previous Address _____
16. Present Business Activity _____

17. Have you ever been convicted of a felony? yes no
If yes, please explain: _____

18. Has your license ever been revoked? yes no
If yes, please explain: _____

19. Have you ever been censured for unprofessional conduct? yes no
If yes, please explain: _____

20. Have you ever served in the armed forces? yes no
If yes, give dates of active service, branch of service, serial number, rate of rank, commendations or decorations, if any, type of discharge: _____

21. Have you ever been discharged or have you ever resigned from a position because of alleged misconduct or misappropriation of funds? yes no

22. In Which states are you now registered as a Real Estate Salesperson or Broker? Submit copies of each registration listed.

State	Registration or License #	Title of License	Expiration Date

23. Have you previously taken the examination for a Virgin Islands Real Estate Broker's License?
 yes no If yes, give date of examination and examination results _____

24. Indicate exact location of "Fixed Office" if the requested license is granted. _____

25. Trade Name of Business _____

All information must be verifiable. Any false information may be cause for denial of license.

**Part IV
AFFIDAVIT (Must be completed by all applicants)**

29. State of _____
Territory of _____
Country of _____

I, _____, being duly sworn, depose and say that I am the person who executed the foregoing instrument; that I have read the same and know the contents thereof; that the matters stated therein are true to my knowledge; that I have not suppressed any information that might affect this application; and that I have read and understand this affidavit.

Applicant's Signature

Sworn and Subscribed before me this _____ day of _____, 20_____.

Notary Public

My Commission expires on _____

Do not write below this line:

COMMISSION DISPOSITION:

APPROVED

DISAPPROVED

Signature, Chairman of the Commission

Date: _____

Member

Member

Member

Member

Member

Member

FORM TCT

GOVERNMENT OF
THE VIRGIN ISLANDS OF THE UNITED STATES

VIRGIN ISLANDS BUREAU OF INTERNAL REVENUE

APPLICATION FOR
TAX FILING AND PAYMENT STATUS REPORT-LICENSING

The applicant identified below hereby requests a letter certifying his or her tax filing and payment status for the purpose of receiving a new or renewal license from the Department of Licensing and Consumer Affairs pursuant to Section 101 of Act 5060, codified as Title 27, Section 304, Subchapter (j), Virgin Islands Code. The applicant authorizes the Virgin Islands Bureau of Internal Revenue to disclose any taxpayer information related to this application to the Department of Licensing and Consumer Affairs, who may make such further disclosures as are necessary to carry out the requirements of Act 5060.

1. BUSINESS NAME: _____
2. BUSINESS EIN: _____
3. OWNERS SSN: _____ SPOUSE SSN: _____
4. PLEASE INDICATE: _____ NEW LICENSE _____ RENEWAL
5. _____ SELF-EMPLOYED _____ CORPORATION _____ PARTNERSHIP _____ LLC _____ LLP
6. DO YOU HAVE EMPLOYEES? _____
7. PLEASE CIRCLE FORMS THAT YOU USE:
(1040/9689,1065,1120,941 VI,720VI,720BVI,722VI, OTHER(list) _____
8. DATE BUSINESS STARTED: _____ LICENSE EXPIRATION DATE: _____
9. PERSON REPRESENTING APPLICANT: _____
10. POSITION OF REPRESENTATIVE: _____
11. SIGNATURE: _____
12. MAILING ADDRESS: _____
13. PHYSICAL ADDRESS: _____
14. DATE: _____ TELEPHONE: _____

REPLY TO: 9601 ESTATE THOMAS, ST. THOMAS, VIRGIN ISLANDS 00802
OR 1008 ESTATE DIAMOND, PI OF 7B, CHRISTIANSTED, VIRGIN ISLANDS 00820-1421

[See back of Form for instructions]

Revised 2/2009

Affidavit

United States Virgin Islands

St. Croix, St. Thomas, St. John

)
SSN: _____
)

I, _____ after first being duly sworn, hereby
depose and say:

1. That I am a resident of _____
2. That during the period from _____ to _____ I have
been residing in _____ and have filed
my Federal Income Tax Returns with and paid any taxes due to the United
States Federal Government at the Internal Revenue Service Office in
_____ and to the State of _____.

Or

3. That during the period from _____ to _____
I have been residing in _____ and I was
unemployed or did not have sufficient income to file an Income Tax Return
(mark out the one that does not apply.) If I was a full or part-time student, I
attended _____.

Signature

Subscribed and Sworn before me on this _____ day of _____.

Notary Public

**REQUIREMENTS FOR LICENSURE
PLEASE READ CAREFULLY AND SIGN**

LICENSING REQUIREMENTS:

1. Applicant is required to pay a **non-refundable application fee of \$300.00.**
2. Applicant must be at least 18 years of age and a resident of the Virgin Islands at least 30 days immediately prior to submission of application.
3. The following documents must accompany the application.
 1. Proof that applicant has been licensed as a Real Estate Salesperson for two (2) consecutive years or is a licensed attorney admitted to practice in the U.S. Virgin Islands.
 2. Certificate of Good Standing from the Territorial or District Court of the Virgin Islands. **(Attorneys only)**
 3. A current favorable tax clearance letter from the V.I. Bureau of Internal Revenue.
 4. Copy of applicant's social security card.
 5. Three (3) passport size photographs of the applicant.

PLEASE NOTE:

*If you were born in a foreign country, you are required to give the date of naturalization or date when permanent resident status was established. Attach a certified copy of documentation for inspection with this application.

*Upon successful completion of the real estate broker's examination, applicants will be required to pay the license fee for permanent licensure in the Virgin Islands.

I HAVE READ THE ABOVE AND UNDERSTAND THE CONTENT OF SAME.

Applicant's Signature

Date