



**West Virginia Real Estate Commission**  
**300 Capitol Street, Suite 400**  
**Charleston, WV 25301**  
**304.558.3555**  
**<https://rec.wv.gov>**

### Trust Fund Account Statement and Consent to Examine

Per the West Virginia Real Estate License Act ([WV Code §30-40-18](#)) all brokers are required to have the following information on file with the Commission.

**To be completed by a financial institution representative:**

Exact Title of the Account: \_\_\_\_\_

(The words "Trust Fund Account" must be included in the title of the account)

Account Number: \_\_\_\_\_ Number of Signatures required for Withdrawals: \_\_\_\_\_

Authorized Signatures: \_\_\_\_\_

Broker

Additional Person(s), if applicable

Name of Financial Institution: \_\_\_\_\_

Address of Financial Institution: \_\_\_\_\_

I hereby certify the above information is complete and accurate to the best of my knowledge. A copy of this authorization will be maintained in our records for future reference and we will notify the Real Estate Commission if any checks are returned for insufficient funds and that we will not require a minimum balance in excess of \$100.00.

\_\_\_\_\_  
SIGNATURE OF BANK OFFICIAL

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

**To be completed by the Broker:**

#### Consent to Examine

The trust fund account identified above is:

- \_\_\_\_\_ a new account that is **not** replacing an existing trust fund account
- \_\_\_\_\_ a new account that is replacing trust fund account number located at \_\_\_\_\_
- \_\_\_\_\_ updated information for an existing trust fund account (e.g. new Authorized Signatures, etc.)

I hereby certify that I shall notify the Real Estate Commission, within ten days, of the establishment of or any change to my trust fund account. As trustee of the account, I authorize the Real Estate Commission, or its duly authorized representative, to make periodic inspections of the trust fund account and to obtain copies of records from any financial institution wherein a trust fund account is maintained. Furthermore, a copy of this authorization shall be accepted by any financial institution with the same force and effect as the original.

\_\_\_\_\_  
BROKER'S SIGNATURE

\_\_\_\_\_  
DATE