

## WEST VIRGINIA REAL ESTATE COMMISSION 300 Capitol Street, Suite 400 Charleston, West Virginia 25301

304.558.3555 rec.wv.gov

## **AFFIDAVIT OF BROKER'S RECOMMENDATION**

	Name of Applicant	IOI DIOREI S LICEIISE				_
•	Name of Employin	g Broker:	<del></del>		_	
•	Applicant was in r	my employ from	to	and earned total	commiss	ions o
	\$	and/or a salary in	the amount of \$	· · · · · · · · · · · · · · · · · · ·		
•	The applicant prac	ticed real estate broker	age an average of	full days per	week.	
					YES	NO
I belie	eve the applicant is relia	ble, honest, trustworthy,	and of good character.			
		gained sufficient experie at would protect the publ		transact business as a real		
I reco	mmend the applicant b	e granted a broker's lice	nse.			
		, please attach addition p the Applicant demor		ly manage a brokerage.		
2. De	escribe how the Appl	icant has gained suffic	ient experience to unde	ertake the responsibilities o	of a broke	er.
	ease provide any ad ualifications for a bro		ս believe would assist t	he Commission in evaluati	ng the A	pplica
4. PI	ease share any othe	r relevant information i	ncluding other employr	ment while working at your		
			noidaing outer employs	nent wrille working at your	brokeraç	ge.
	igning below, you attes	t under oath that the abov		d correct to the best of your kr		
By s	igning below, you attes			d correct to the best of your kr		
By s ATE OF						
By s ATE OF UNTY OF				d correct to the best of your kr Licensed Real Estate Broker		
By s ATE OF OUNTY OF	ken, subscribed and swor		ve statements are true and	d correct to the best of your kr Licensed Real Estate Broker		