



**Designated REALTOR® and/or MLS Participant
Branch Office Request Form**

email form to: membership@dfwre.com

Branch Office Name: _____

Main Office Name: _____

**Please note: You are required to register each branch office with the Texas Real Estate Commission as a DBA or through an LLC or Corporate License.*

Corporate License Number (if applicable): _____

Street Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

Office Phone: _____ Office Fax: _____

Authorized Signer(s): _____

**will have authority to make changes to the firm and/or agents in the firm*

Office Manager: _____

**will have authority to make changes to the firm and/or agents in the firm; will also have access to accounting information of the firm and/or agents in the firm*

Designated Broker's Printed Name

Designated Broker's Signature

Date