Department of Commerce
Division of Real Estate & Professional Licensing
John R. Kasich, Governor
Andre T. Porter, Director
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Columbus, Ohio 43215-6133

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REAL ESTATE

NAME RESERVATION APPLICATION - BUSINESS

❑**Reserve** a business entity or doing business as (DBA) name **for sixty days**.
❑**Extend** a prior name reservation **for sixty more days**.

FEE: $10.00

A check or money order for $10, made payable to the Ohio Division of Real Estate & Professional Licensing, must accompany this application.

FOR DIVISION USE ONLY
FILE NUMBER

The Division will research the name to determine compliance with Ohio Revised Code 4735.06 (A). Notification of the results will be forwarded to the applicant within fourteen days. After receiving approval from the Division, contact the Ohio Secretary of State's office to reserve the name with that office. Note: The name reservation approval will expire after sixty (60) days. If the remainder of the business application process has not been completed within sixty (60) days, the name will be released.

1. APPLICANT'S FILE NUMBER	FILE NUMBER (If applicable)			FEDERAL TAX ID NUMBER
2. CURRENT BUSINESS ENTITY NAME	CURRENT BUSINESS ENTITY NAME			
3. NEW BUSINESS ENTITY NAME	NEW BUSINESS ENTITY NAME			
4. NEW FICTITIOUS OR DBA NAME	NEW FICTITIOUS OR DOING BUSINESS AS (DBA) NAME			
5. CORRESPONDENCE ADDRESS (Where the division should send correspondence.)	STREET ADDRESS			BUSINESS PHONE
	CITY	COUNTY	STATE	ZIP CODE
6. PHYSICAL PLACE OF BUSINESS ADDRESS (must be physically located in Ohio)	STREET ADDRESS			BUSINESS PHONE
	CITY	COUNTY	STATE **OH**	ZIP CODE
7. FRANCHISE?	Are you associated with a real estate franchise? ❑YES ❑NO If YES, what is the franchise name? _____			

8. Name of applicant or broker/officer/member/partner authorized to bind same. (type or print)	Signature of applicant or broker/officer/member/partner authorized to bind same. **Signature X:** _____	Date

SUPPLEMENTAL INSTRUCTIONS FOR COMPLETING BOXES 1 – 7 ABOVE

BOX 1: FILE NUMBER: Enter the applicant's file number, if applicable. If applicant is unlicensed, leave blank.

BOX 2: CURRENT BUSINESS ENTITY NAME: If changing an existing business entity name, enter current business entity name. If requesting a business entity name for a new business, leave this box blank.

BOX 3: NEW BUSINESS ENTITY NAME: Enter new business entity name. If only adding or changing a fictitious or Doing Business As (DBA) name, leave this box blank. Do NOT include a franchise name in your business entity name request.

BOX 4: NEW FICTITIOUS OR DBA NAME: Enter new fictitious or Doing Business As (DBA) name, if applicable. Do NOT include a franchise name in the DBA name request.

BOX 5: CORRESPONDENCE ADDRESS: Enter the address where the Division should send name reservation correspondence.

BOX 6: PLACE OF BUSINESS ADDRESS: Enter the physical address of the business. *If you do not have a physical address at this time, enter the proposed city of the new company. **Please note:** Ohio law requires that Ohio licensed brokerages maintain a physical place of business in Ohio.

BOX 7: FRANCHISE?: If your company is joining or is already associated with a real estate franchise, please enter the franchise name in this box.