

Please visit our website at www.com.ohio.gov/real

614|466-4100 Fax: 614|644-0584 TTY/TDD: 800|750-0750

Fee: \$25.00

Anne M. Petit, Superintendent

REQUEST FOR LICENSE HISTORY/LETTER OF GOOD STANDING FOR OHIO REAL ESTATE LICENSE

| - , | Licensee: |
|------------|---|
| License I | No |
| | This information is required to verify license history. |
| | Without the license number, the Division may not be able to locate records if not currently licensed. |
| Mail Cer | tificate to (name and address): |
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| Please lis | t any additional information that should be included with your request below: |
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Mail request and \$25 fee to:

Ohio Division of Real Estate & Professional Licensing 77 S. High Street, 20th Floor Columbus, OH 43215-6133

If you have any questions, please contact the Division at 614-466-4100.

Revised: 2/2010