



SUBSIDIARY/AFFILIATE REGISTERED BUSINESS NAME (RBN)

2/2009

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Use this form to establish a link between two registered business names (RBNs), either as a subsidiary or an affiliate. By doing so, it allows a principal broker, sole practitioner or property manager to be licensed to both RBNs.

To establish a subsidiary or affiliated relationship, the organizations must have shared controlling interests. More than 50% of the control of each organization must be in common. **If you don't know which category your business relationship falls under, contact your attorney or accountant to help you make that determination.**

INSTRUCTIONS

- 1) In Section A, identify the two affiliated or subsidiary registered business names (RBNs). **NOTE:** If the affiliate/subsidiary organization is not already registered with the Agency, a Registered Business Name Application is also needed for that business. [Ref: OAR 863-014-0061]
- 2) Complete either Section B (if subsidiary) **OR** Section C (if affiliated) to define shared controlling interests. **Do not complete both sections.** A subsidiary is an entity that is controlled by a parent company. An affiliate is an entity that is related to, but not strictly controlled by, a parent company.
- 3) This form must contain the original signature of the licensee authorizing this change. Authorizing licensee may be a principal broker, sole practitioner broker or property manager.
- 4) The licensee signing Section D will be licensed to both RBNs. An individual licensed to multiple RBNs only receives one license card and it contains the name of the parent organization, not the affiliate/subsidiary.

SECTION A REGISTERED BUSINESS NAMES (RBNs)

CURRENT REGISTERED BUSINESS NAME (RBN) (Parent Organization)	<input type="checkbox"/> AFFILIATE ORGANIZATION
<input type="checkbox"/> SUBSIDIARY ORGANIZATION	
Registered Business Name	Registered Business Name
Permanent ID Number (if RBN is already registered)	Permanent ID Number (if RBN is already registered)
Main Office Street Address	Main Office Street Address
City, state, zip	City, state, zip

SECTION B SUBSIDIARY ORGANIZATION CONTROLLING INTEREST

I certify that the parent company named above owns the majority of the voting stock of the subsidiary company named above. The parent company owns _____%.

OR

SECTION C CONTROLLING INTEREST OF AFFILIATED ORGANIZATIONS

AFFILIATE: CONTROLLING INTEREST OF PARENT ORGANIZATION		AFFILIATE: CONTROLLING INTEREST OF AFFILIATE ORGANIZATION	
Owner	% of Ownership	Owner	% of Ownership
Owner	% of Ownership	Owner	% of Ownership

SECTION D AUTHORIZATION

By signing below, I certify under penalty of law that I have the authority to request this action. I hereby authorize and request the changes indicated in this form.

Name of Licensee Authorizing this Change		License Number
Original Signature	Date	Daytime Phone Number ()