

INSTRUCTIONS

1. This form is to be completed by a managing broker of the brokerage and by a director, officer, partner or sole proprietor of the brokerage.
2. If there is insufficient space on the form, please provide the requested information in an attachment.
3. This form is to be returned to the Real Estate Council with the Accountant's Report and the financial statements for the fiscal year.

PART A	
The following information is given with respect to _____ for the fiscal year <div style="text-align: center; font-size: small; margin-top: -10px;">(legal name of brokerage)</div>	
commencing on _____ and ending on _____ <div style="display: flex; justify-content: space-between; font-size: x-small; margin-top: -10px;"> (first day of the brokerage's fiscal year) (last day of the brokerage's fiscal year) </div>	
Has the brokerage notified the Council of all business changes during the past fiscal year, as required by section 2-22 of the Council Rules? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, attach details)	
Number of related licensees as of date signed	

PART B			
Indicate below the <u>approximate</u> percentage of the brokerage's current total business activities, based on dollar volume, represented by the following activities (total = 100%):			
Residential sales	Commercial sales	Rental property management	Strata management
Leases	Appraisals	Consulting services	
Indicate below the <u>approximate</u> number of transactions the brokerage has been involved with during the past fiscal year:			
Residential sales	Commercial sales	Leases	Appraisals
Indicate below the <u>approximate</u> number currently managed:			
Rental units	Strata units		
Indicate below the <u>average</u> monthly trust balance in all trust accounts relating to:			
Trades in real estate (real estate transactions)		Commissions	
Indicate the average monthly total of rents received:			
Indicate the average monthly total of strata fees held or received on behalf of strata corporations:			

PART C		
Print name of managing broker	Signature of managing broker	Date MM/DD/YYYY
Print name of director/officer, partner or sole proprietor	Signature of director/officer, partner or sole proprietor	Date MM/DD/YYYY

Mailing Address Real Estate Council of British Columbia 900-750 West Pender Street Vancouver, BC Canada V6C 2T8	Enquiries Tel: 604.683.9664 Toll-free: 1.877.683.9664 Fax: 604.683.9017 www.recbc.ca info@recbc.ca
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