

## FORM 1 Real Estate Brokerage's Representations to the Nova Scotia Real Estate Commission

If you <u>HELD</u> funds on the account of others for closed or terminated trades during the period under review, this completed form must be returned to the Commission Auditor **per the Auditor's direction**.

## DO NOT LEAVE ANY QUESTIONS UNANSWERED

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	al Information  The licensed name of the brokera	uge with the Nova Scotia I	Real Estate Commission is:	
1.	The licensed fidure of the brokers	ige with the Nova Scotia i	Car Estate Commission 13.	
2.	The brokerage's <b>records</b> are locate	ed at:		
3.	3. Audit Period under review is:toto			
4.	<ul> <li>The type of agency practiced is:</li> <li>The following trust accounts were maintained during the period under review (attach a second shee required):</li> </ul>			
5.		e maintained during the	period under review (attach a second she	
5.		Account Number	period under review (attach a second she  Signing Officer (s) on the  account	
5.	required):	Account	Signing Officer (s) on the	
	required):	Account	Signing Officer (s) on the	
	required):  Financial Institution  During the audit period:	Account Number	Signing Officer (s) on the	

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7. The brokerage's trust records correctly reflect all the transactions up to the end of the period review and is supported by:	od under		
<ul><li>a. Trust control ledger</li><li>b. Monthly trust account bank reconciliations</li><li>c. Monthly trust liability listings</li><li>d. Individual trust records</li></ul>	OYES ONO OYES ONO OYES ONO OYES ONO		
8. All trust account records, including cheques and bank statements reflect the licensed brokerage name	OYES ONO		
9. Were there any trust shortages during the audit period?	OYES ONO		
(a) If yes, were they rectified? Please explain and provide details:			

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10. Please complete the following for your audit period (attached a second sheet if required): Financial Institution: \_\_\_\_\_\_Account #: \_\_\_\_\_ **Month Reconciled Trust Account Balance** Completed this \_\_\_\_\_\_day of \_\_\_\_\_\_\_, 20 \_\_\_\_ (Print or Type Name of Broker or Managing Associate Broker)

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(Signature of Broker or Managing Associate Broker)