



**APPRAISER CERTIFICATION
AND LICENSURE BOARD**
 3000 MARKET STREET NE, SUITE 541
 SALEM, OR 97301
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 www.oregonaclb.org

Current
2x2
color
photo
required

APPLICATION FORM BY OUT-OF-STATE CREDENTIAL HOLDER (NON-RECIPROCAL)

INSTRUCTIONS: Please type or print legibly in ink. All applications must be accompanied by a current 2" x 2" color passport-style photo, Affidavit and Consent to Service Forms, and a non-refundable \$75 application fee. You must have an active appraiser license/certificate that is in good standing in a state other than Oregon. You must request a license history from that state licensing agency and have it sent directly to the ACLB. If you completed and passed an AQB approved examination and obtained your original certificate in a state other than the one you are currently licensed in, you must also request a license history from that state licensing agency and have it sent directly to the ACLB. If you have taken and passed AQB approved examination subsequent to January 1, 2008, you must contact the test provider and have them send a copy of your test results directly to the ACLB. If you took and passed an AQB approved examination prior to January 1, 2008, you will be required to take and pass the Oregon examination before being issued an Oregon certificate. **PLEASE ALLOW AT LEAST 30 DAYS FOR APPLICATION REVIEW AND PROCESSING.**

TYPE OF APPLICATION (check one):

_____ State Certified Residential Appraiser

_____ State Certified General Appraiser

APPLICANT: _____
 Last Name First Name M.I

HOME ADDRESS: _____
 Address City State Zip Code

HOME MAILING ADDRESS (If different): _____
 Address City State Zip Code

COUNTY: _____
 (Home Phone) (Work Phone) (Fax Number)

SOCIAL SECURITY NUMBER: _____ **SEX:** MALE _____ FEMALE _____
 (Required/Mandatory)

DATE AND PLACE OF BIRTH: _____ / _____ / _____
 Month Day Year City State

APPRAISER LICENSE/CERTIFICATE NUMBER: _____ **STATE OF ISSUE:** _____

DRIVER LICENSE NUMBER: _____ **STATE OF ISSUE:** _____

US CITIZEN OR LEGAL RESIDENT (Yes or No): _____ **E-MAIL ADDRESS:** _____
 (Required/Mandatory)

NAME OF EMPLOYER OR DBA (to appear on license): _____

BUSINESS OR EMPLOYER ADDRESS (to appear on license) (Including City, St. Zip): _____

1. Have you **EVER** had an application for certification or licensure as an appraiser denied by the State of Oregon or any other state? If yes, please explain and submit a copy of the denial notice/order. Yes___No___

2. Have you **EVER** been reprimanded or fined or had a license, certificate or registration suspended, revoked, restricted, denied, or surrendered in this or any other state by any agency that has granted you a license, certificate or registration to engage in a regulated occupation, trade or profession. If yes, please explain and provide a copy of any documentation that describes the charges against you and the action taken by the agency. Yes___No___

3. Are you the subject of **ANY** pending investigation, administrative sanction proceeding, hearing, trial or similar action by any agency that has granted or denied you a license, certificate or registration to engage in a regulated occupation, trade or profession? If so, explain and submit a copy of any documentation that describes the charges against you. Yes___No___

4. (A) Have you **EVER** entered a plea of nolo contendere, been found guilty of or convicted of a *felony*? If yes and the information has not been previously submitted in a prior application to the ACLB, fully explain the facts of the offense and identify the location of jurisdiction of the proceedings. Include a copy of all final court documents identifying charges and assessing penalties. The Appraiser Certification and Licensure Board conducts criminal background checks on all applicants. Yes___No___

5. Have you **IN THE LAST TEN YEARS** entered a plea of nolo contendere, been found guilty of or convicted of a *misdemeanor*? If yes to either of these questions, and the information has not been previously submitted in a prior application to the ACLB, fully explain the facts of the offense and identify the location of jurisdiction of the proceedings. Include a copy of all final court documents identifying charges and assessing penalties. The Appraiser Certification and Licensure Board conducts criminal background checks on all applicants. Yes___No___

6. Are you now awaiting trial or sentencing in any criminal proceeding? If yes, fully explain the facts of the offense and identify the location of jurisdiction of the proceedings. Yes___No___

7. Have you **EVER** used any name other than the one herein, either initials, surname, maiden name, or alias? If yes, please state all other names used. Yes___No___

I CERTIFY UNDER PENALTY OF PERJURY that the information provided in my application is true and accurate to the best of my knowledge.

I FURTHER CERTIFY UNDER PENALTY OF PERJURY that I hold an existing credential equivalent to the level being sought in Oregon pursuant to this application; and that I have met AQB education and experience requirements and passed an AQB approved qualifying examination for that credential.

I FURTHER ACKNOWLEDGE:

- I have read this application form in its entirety.
- I have read and agree to comply with all provisions of the appraiser license laws and rules in the Sate of Oregon.
- That falsification or misrepresentation of any of the information submitted as part of this application is grounds for the denial of issuance of an appraiser license or certificate and/or subsequent disciplinary action during the term of the license or certificate.
- I understand that my signature on this application is my consent for a criminal offender record check by the Appraiser Certification and Licensure Board.
- All fees are non-refundable.
- I understand that my social security number is required pursuant to ORS 25.785 and that failure to provide my social security number will be a basis to refuse to issue or renew my license. I also understand that my social security number will be used for child support enforcement purposes, criminal background checks, National Registry identification, taxpayer identification and/or identification on government education loans.
- I agree to cooperate with any investigation initiated by the Oregon Appraiser Certification and Licensure Board.
- I acknowledge that, should my application be approved, if I have not previously completed an AQB approved examination subsequent to January 1, 2008 at a level consistent with the appraiser category applied for in the State of Oregon, I shall be required to take and successfully complete the examination.

SIGNATURE OF APPLICANT

DATE

**STATE OF OREGON
APPRAISER CERTIFICATION AND LICENSURE BOARD**

CONSENT TO SERVICE OF PROCESS

KNOW ALL MEN BY THESE PRESENTS:

I _____ am a non-resident of the State of Oregon, and I am an applicant before the Appraiser Certification and Licensure Board of the State of Oregon for an Oregon real estate appraisal certificate.

I agree that my acceptance of a certificate issued by the Oregon Appraiser Certification and Licensure Board is equivalent to an appointment by me of the Administrator of the Board as my agent for service of in lawful summons, process or pleading in any action or suit against me in any Oregon Court arising out of my activities as a certified appraiser in Oregon. I further agree that service so made upon the Administrator of the Board shall have the same legal force and validity as if service had been made on me personally in this state provided that:

1. Notice of the service and a copy of the summons, process or pleading is sent forthwith by registered mail by the plaintiff or the plaintiff's attorney to the defendant, at the most recent address furnished to the Administrator of the Board by the non-resident licensee or to the non-resident licensee's last-known address; and
2. An affidavit of the plaintiff or the plaintiff's attorney of the mailing is appended to the summons, process or pleading and entered as a part of the return thereof.

I, _____ do hereby certify that records of my real estate appraisal activity, conducted in the State of Oregon, will be kept at the following address: _____, and that they will be available to the Appraiser Certification & Licensure Board Administrator or a duly authorized representative of the Appraiser Certification & Licensure Board, during normal business hours.

In witness whereof, applicant or license or certificate holder has subscribed his or her name hereto this _____ day of _____, 20____.

Applicant's Signature

STATE OF _____

On this _____ day of _____, in the year _____, before me _____

Personally appeared _____ and proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged that he or she executed it.

Signature of Notary Public

My Commission Expires: _____

SEAL