



**APPRAISER CERTIFICATION  
AND LICENSURE BOARD**  
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www.oregonaclb.org

**Official Use Only**

**SUPERVISING APPRAISER ENDORSEMENT APPLICATION**

**INSTRUCTIONS:** All forms must be submitted on 8.5" x 11" paper. Please type or print legibly, in ink, all information as requested below. Complete and sign the application form. Fill out the experience log, documenting the 20 most recent appraisal reports. Submit the completed application and experience log to the Board, along with the \$75 non-refundable application fee payable to "ACLB", and a copy of the certificate of completion for the 4-hour Supervising Appraiser/Appraiser Assistant Training Course.

**PLEASE ALLOW A *MINIMUM* OF 60 DAYS FOR PROCESSING AND EXPERIENCE AUDIT**

**APPLICANT:** \_\_\_\_\_  
Last Name First Name M.I.

**CERTIFICATE / LICENSE NO.:** \_\_\_\_\_ **EXPIRATION DATE:** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_  
Physical Address City State Zip Code

**MAILING ADDRESS:** \_\_\_\_\_  
Address City State Zip Code

**BUSINESS NAME OR EMPLOYER:** \_\_\_\_\_

**BUSINESS OR EMPLOYER ADDRESS:** \_\_\_\_\_  
City State Zip Code

**COUNTY:** \_\_\_\_\_  
Home Phone Work Phone Fax Number

**US CITIZEN OR LEGAL RESIDENT:** YES \_\_\_ NO \_\_\_ **E-MAIL ADDRESS:** \_\_\_\_\_

**SOCIAL SECURITY NUMBER:** \_\_\_\_\_ **SEX:** Male \_\_\_\_\_ Female \_\_\_\_\_  
(Mandatory)

**DATE AND PLACE OF BIRTH:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year City State

**DRIVER LICENSE NUMBER:** \_\_\_\_\_ **STATE OF ISSUE:** \_\_\_\_\_

1. Have you been licensed or certified for at least 24 months? (If no, you do not qualify) Yes \_\_\_ No \_\_\_
2. Do you currently hold an active license in good standing with the Board as defined in OAR 161-002-0000(18)? Yes \_\_\_ No \_\_\_
3. Are there any other factors such as those identified in OAR 161-025-0025(3) that would prohibit you from supervising appraiser assistants? Yes \_\_\_ No \_\_\_

4. Have you attended a Board approved Supervisor Appraiser/Appraiser Assistant Training Course and passed the final exam? Yes\_\_\_\_\_No\_\_\_\_\_
5. 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\_\_\_\_\_
6. 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\_\_\_\_\_
7. 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\_\_\_\_\_
8. 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. Yes\_\_\_\_\_ No\_\_\_\_\_
9. 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. Yes\_\_\_\_\_ No\_\_\_\_\_
10. Are you now awaiting trial or sentencing in any criminal proceeding? If yes, fully explain the facts of the alleged offense and identify the location of jurisdiction of the proceedings. Yes\_\_\_\_\_No\_\_\_\_\_
11. Have you **EVER** used any name other than the one herein, either initials, surname, maiden name, or alias? If yes, please state below all other names used. Yes\_\_\_\_\_ No\_\_\_\_\_

## Acknowledgement

- I certify that the information provided herein is true and correct to the best of my knowledge.
- I understand that withholding information, falsification or misrepresentation of any of the information submitted as part of this application is grounds for denial of issuance of a Supervisor Appraiser Endorsement and could be grounds for subsequent disciplinary action.
- I certify that I have read ORS Chapter 674 and OAR Chapter 161 and I understand that it is my responsibility to comply with all state regulations including the Uniform Standards of Professional Appraisal Practice (USPAP) and that failure to comply is cause for disciplinary action.
- I certify that I will fulfill the responsibilities of a Supervising Appraiser as described in OAR 161-025-0025 when training any Appraiser Assistant that may work under my direct supervision.
- I understand that the Board conducts criminal background checks on all applicants and that my signature on this application is my consent for the Board to conduct such a criminal offender record check in connection with this application.
- 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 a Supervisor Appraiser Endorsement.
- I also understand that my social security number will be used for child support enforcement purposes, criminal background checks, national registry identification and/or taxpayer identification.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date