



**APPRAISER CERTIFICATION
AND LICENSURE BOARD**

3000 Market Street NE, Suite 541
Salem OR 97301
(503) 485-2555
Fax (503) 485-2559

Supervising Appraiser Endorsement Application

INSTRUCTIONS: Type, or print legibly in ink. Sign the completed application and include:

- \$75 non-refundable application fee made payable to "ACLB";
- Completed log of last 20 appraisal reports;
- Signed Supervising Appraiser/Appraiser Assistant course completion certificate.

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

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

Audit Report Requested

Audit Report Completed

For Office Use
ASC _____
LEDS _____
Date Paid _____
CC/CK _____
AMT _____

For Office Use
Date Received

1. Have you been certified for at least **36** months? (If no, you do not qualify) Yes____No____
2. Do you currently hold an active license in good standing with the Board? OAR 161-025-0025 (1) Yes____No____
3. Have you been subject to any disciplinary action within any jurisdiction within the last 3 years that affects the Supervising Appraiser's legal eligibility to engage in appraisal practice?
OAR 161-0205-0025(1) Yes____No____
4. Have you attended an **AQB** approved Supervising Appraiser/Appraiser Assistant Training Course? 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 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[3(a-f)] 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, collections and/or taxpayer identification.

Signature of Applicant

Date

