

IOWA REAL ESTATE APPRAISER EXAMINING BOARD

200 E GRAND, SUITE 350, DES MOINES, IA 50309

515-725-9021

www.state.ia.us/iapp

APPLICATION FOR ISSUANCE AND REGISTRATION OF APPRAISER CERTIFICATE BY RECIPROCITY

APPLICATION FOR *(check one)*

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Certified Residential, Licensed for 12 months or longer | \$390 + \$50 application fee = \$440 |
| *Licensed for less than 12 months | \$195 + \$50 application fee = \$245 |
| <input type="checkbox"/> Certified General, Licensed for 12 months or longer | \$390 + \$50 application fee = \$440 |
| *Licensed for less than 12 months | \$195 + \$50 application fee = \$245 |

*Based on renewal cycle. Applicants applying for initial registration or certification within 12 months from their required renewal date of June 30th shall pay half the required fee. Applicants applying for initial registration or certification more than 12 months from their required renewal date shall pay the full fee. (Persons whose last names begin with the letters A through K shall renew in even-numbered years. Persons whose last names begin with the letters L through Z shall renew in odd-numbered years.)

GENERAL INFORMATION:

Name:	
Home Address:	Business Name:
	Business Address:
Birth Month:	
	Business Phone:
Phone:	Business Fax:
Have you ever been known by a name(s) other than the one shown above? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, list them here:	

REGISTRATION INFORMATION:

Original appraiser certificate issued as a <input type="checkbox"/> Certified Residential Appraiser <input type="checkbox"/> Certified General Appraiser under the laws of the state of _____.				
CERTIFICATE NUMBER	DATE ISSUED	EXPIRATION DATE		
Did you obtain your appraiser certificate/license by satisfactorily passing an approved uniform examination? <input type="checkbox"/> Yes <input type="checkbox"/> No (if you answered "no" to this question, attach an explanation)				
What other appraiser certificate(s) and/or license(s) do you hold? Attach additional sheets, if necessary.				
STATE	LICENSE NUMBER	ISSUE DATE	LICENSE TYPE	CURRENT STATUS

FELONY, FRAUD & DISCIPLINARY INFORMATION:

*Yes No Have you ever been convicted of a felony or misdemeanor criminal offense? (other than scheduled traffic violations - a conviction of operating while intoxicated [OWI] is not a scheduled traffic violation and must be disclosed) A "conviction" includes a guilty plea, a deferred judgment prior to discharge, and a finding of guilt by a judge or jury. If yes, attach a complete and detailed explanation of each conviction including the date of conviction, the name and location of the court, the nature of each charge (for example: felony, aggravated misdemeanor, etc.), the sentence imposed, and whether you have satisfied all terms of the sentence. All convictions must be disclosed regardless of the date when entered or whether the criminal record has been expunged.

*Yes No Are there criminal charges now pending against you? (other than scheduled traffic violations) If yes, attach a complete and detailed explanation of each charge including the date of arrest or charge, the arresting agency, the nature of each charge, the type of each charge (for example: felony, aggravated misdemeanor, etc.) and the name and location of the court. You will need to supplement this answer to provide the disposition of each pending charge once known.

*Yes No Ever been declared by a court of competent jurisdiction to have committed fraud?

*Yes No Ever been subject to disciplinary action by any state Board or similar licensing body, a governmental agency before which you practiced, or any professional organization of which you are a member?

***If you answered "Yes" to any of these questions please attach a complete explanation.**

TO BE COMPLETED BY THE APPLICANT. Seal of notary is required.

STATE OF _____)

COUNTY OF _____)

I hereby make application for an Iowa appraiser certificate by reciprocity in accordance with Iowa Code Chapter 543D and the related rules adopted by the Iowa Real Estate Appraiser Examining Board. I enclose the required application and registration fees.

This application shall also serve as an irrevocable consent that service of process upon me may be made by delivery of the process to the secretary of state, if an action against me in a court of this state arises out of my activities as a certified real estate appraiser, the plaintiff cannot, in the exercise of due diligence, effect personal services upon me.

I hereby swear (or affirm) that the foregoing statements are true and correct to the best of my knowledge and belief and that I have not suppressed any information that might have a bearing on this application.

Applicant's Signature _____ Date: _____
(IN BLUE INK)

Signature of Notary Public _____
(IN BLUE INK)

Subscribed and sworn before me this _____ day of _____, _____.

My Commission Expires _____.

Information provided on this application may be disclosed pursuant to chapter 543D Code of Iowa and Administrative Rules 193F.

The following page is to be completed only if the applicant is not on the Appraisal Foundation's National Registry.

Applicants on the National Registry can disregard the next page of the application form.

TO BE COMPLETED BY STATE LICENSING BOARD ISSUING ORIGINAL APPRAISER CERTIFICATION.

Complete this section **ONLY** if not on the Appraisal Foundation's National Registry.

This is to certify that _____, is the holder of Certified Residential or Certified General (*please circle one*) appraiser certificate number _____, issued under the laws of the State of _____, on _____. The appraiser certificate was issued as a result of successfully completing an approved Uniform Examination, exam date _____. (*If reason differs, attach an explanation.*) The appraiser certificate is currently registered and in good standing with this board. The registration is valid through _____. To date, have there been any complaints or charges concerning the above named individual brought before this board? ___ yes ___ no. Please furnish the Iowa Real Estate Appraiser Examining Board in strict confidence, full information concerning any complaint that may have involved the applicant and state the disposition of such complaint. Please send any information concerning complaints under separate cover.

Date

Signature

Board
Seal

Title

Applicants may attach a certification of licensure from the state in lieu of the above.

**** NOTICE ****

THIS PAGE WILL NOT BE ADDED TO FILE OR PART OF PUBLIC RECORD

CONFIDENTIAL INFORMATION

Privacy Act Notice: Disclosure of your Social Security Number on this license application is required by 42 U.S.C. § 666(a)(13), Iowa Code §§ 272J.8(1) and 261.126(1) (2007), and Iowa Code § 272D.8(1) (Supp. 2008). The number will be used in connection with the collection of child support obligations, college student loan obligations, and debts owed to the state of Iowa, and as an internal means to accurately identify licensees, and may also be shared with taxing authorities as allowed by law including Iowa Code § 421.18 (2007).

Social Security number _____ - _____ - _____

EMAIL: _____

METHOD OF PAYMENT

PAYMENT OPTION 1 -

Payment Enclosed, Check or Money Order made payable to "State of Iowa"

PAYMENT OPTION 2 -

Please bill my credit card \$ _____:

Discover Number _____ - _____ - _____ - _____

MasterCard Number _____ - _____ - _____ - _____

Visa Number _____ - _____ - _____ - _____

Expiration Month and Year: _____ / _____

Signature of Cardholder: _____