



REAL ESTATE APPRAISER
SECTION
P.O. BOX 9048
OLYMPIA, WA 98507-9048
dol.wa.gov

Real Estate Appraiser

Reciprocal License/Certification Application

FOR VALIDATION ONLY

Application Fee: \$246.00
Certification Fee: \$206.00
Total Fees - \$452.00
All Fees are Non-Refundable

Make remittance payable to State Treasurer.
Send this application with your remittance to:
Department of Licensing
PO Box 9048
Olympia, WA 98507-9048

Check one only:

Certified General **Certified Residential** **State Licensed**

Information and Instructions

If you are currently licensed/certified in good standing in another state, you may attain a Reciprocal License/Certificate to practice real estate appraisal in the state of Washington by meeting the requirements of RCW 18.140 and WAC 308-125. **Application must be notarized.**

Please type or print clearly

Applicant Personal Information

Name (last, first, middle)		Social Security no. (RCW 26.23.150)		Date of birth	
Mailing address					
City		State	Zip	County	
Business Name					
Business address (current physical address of business is required)					
City		State	Zip	County	
Telephone no. (during normal business hours) ()		E-mail address		Gender (F or M)	
State of your active current license					

Applicant's Licensing Information

Out-of-State License/Certificate No.	State	Out-of-State License/Certificate No.	State
Have you ever applied for licensure/certification as a real estate appraiser in Washington State?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, full name under which you are licensed (as it appears on your license).			License No.
Are you currently licensed in Washington State as a real estate salesperson, broker, or associate broker, or escrow agent?			<input type="checkbox"/> Yes <input type="checkbox"/> No

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Once filed, this application is a public record and is subject to public disclosure. RCW 42.56

Personal Data



If you answer any of the following questions "Yes", provide full details on a separate (8-1/2" x 11") sheet, and include official court documents.

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. With the exception of motor vehicle violations, have you ever been convicted of a crime, felony, or misdemeanor by this state, any other state, the federal government, or any other jurisdiction within the past ten years? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has any application for a professional or occupational license or permit or registration made by you ever been denied, or has a license or permit or registration issued to you ever been suspended, revoked, censured, or fined, in this state or any other jurisdiction? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you ever had a civil court order, verdict, or judgement entered against you in any court of competent jurisdiction in which the subject matter involved any real estate or business related activity? Have you ever entered a plea of <i>nolo contendere</i> ? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you ever used any name other than the one provided here, either initials, surname, maiden name, or alias? | <input type="checkbox"/> | <input type="checkbox"/> |

Applicant's Attestation

I, the undersigned, certify that I am the person referred to in the foregoing application for licensure/certification as a real estate appraiser in the state of Washington, that I have read and understand RCW 18.140 and WAC 308-125, and that the statements herein are true to the best of my knowledge and belief. I declare under penalty of perjury that my answers and all statements made by me herein are true and correct. Should I furnish any false information in this application, I hereby agree that such act shall constitute cause for the denial, suspension, or revocation of my certification/license to practice as a certified/licensed real estate appraiser in the state of Washington.

I hereby authorize all organizations, my references, employers (past and present), business and professional associates (past and present) and all governmental agencies and instrumentalities (local, state, federal or foreign) to release to the Department of Licensing any information, files, or records requested by the department in connection with the processing of this application.

X

Applicant's signature

Date

Consent to Service – requirement for all out-of-state applicants.

I, the undersigned, residing in the state of _____, have obtained or am about to obtain a license/certification from the state of Washington to engage or continue in the business of real estate appraising. I irrevocably consent that suits and actions may be commenced against me in any county of the state of Washington in which any party/plaintiff having cause of action against me may reside and that service of any process or pleading in an action or suit may be made by delivering it to the Director of the Department of Licensing of the state of Washington, at Olympia, Washington.

X

Applicant's signature

Date

Name typed or printed

Notary

State of

County of

Signed or attested to before me on

X

Signature

Name typed or printed

Title

Expiration date of appointment

SEAL