



STATE OF MAINE
DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION
MAINE BOARD OF REAL ESTATE APPRAISERS

LICENSE APPLICATION

APPLICANT INFORMATION (please print)

FULL LEGAL NAME	<i>FIRST</i>	<i>MIDDLE INITIAL</i>	<i>LAST</i>
ANY OTHER NAMES EVER USED:			
DATE OF BIRTH	<i>mm / dd / yyyy</i>	SOCIAL SECURITY NUMBER	- -
MAILING ADDRESS			
CITY	STATE	ZIP	COUNTY
PHONE # ()	FAX # ()	E-MAIL	
DISCIPLINARY ACTION DISCLOSURE			
<i>NOTE: Failure to disclose disciplinary action may result in denial, fines, suspension and/or revocation of a license.</i>			
1. Has any jurisdiction taken disciplinary action against any professional license you hold or have held, or denied your application for licensure? (circle one)			
		NO	YES
If yes, enclose a detailed explanation and copies of all documents.			
2. Have you graduated from high school or received a GED? (circle one)			
		NO	YES
By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief. By submitting this application, I affirm that the Office of Professional & Occupational Regulation will rely upon this information for issuance of my license and that this information is truthful and factual. I also understand that sanctions may be imposed including denial, fines, suspension or revocation of my license if this information is found to be false.			
SIGNATURE		DATE	

APPLICATION FOR A TEMPORARY LICENSE

X	TEMPORARY LICENSE (TL)	\$120
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Office Use Only: 4695 1446—\$30 1421—\$90 (TL)

Office Use Only Check # _____ Amount: _____ Cash # _____ Lic. # _____ Issue Date _____ Exp. Date _____
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PAYMENT OPTIONS:

Make checks payable to "Maine State Treasurer" - If you wish to pay by Mastercard or Visa, fill out the following:

NAME OF CARDHOLDER (please print)	<i>FIRST</i>	<i>MIDDLE INITIAL</i>	<i>LAST</i>
I authorize the Department of Professional and Financial Regulation, Office of Professional & Occupational Regulation to charge my <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD the following amount: \$_____			
I UNDERSTAND THAT FEES ARE NON-REFUNDABLE			
Card number:	<i>XXXX-XXXX-XXXX-XXXX</i>	Expiration Date	<i>mm / yyyy</i>
SIGNATURE		DATE	

**INSTRUCTIONS TO COMPLETE AN APPLICATION FOR A
TEMPORARY LICENSE IN MAINE**

1. Complete the one page temporary appraiser **license** application.
2. Attach a copy of your letter of engagement. Letter of engagement must specify the location of the property and the timeline for completion.
3. Enclose check or money order payable to "Treasurer State of Maine" for \$410.00 and mail to the address noted below. Alternatively you may fill out the credit card portion of the application and fax or email it to the board. The Board also has on-line applications on the [web site](#) which is your fastest option.

FAX NUMBER: 207-624-8637

EMAIL: rlestateappr.board@maine.gov

Our mailing address for U.S. Postal Service via, regular, priority, or express mail services is:

**DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION
BOARD OF REAL ESTATE APPRAISERS
35 STATE HOUSE STATION
AUGUSTA ME 04333-0035**

(Please note that the USPS will only deliver to the address above and will NOT deliver to our physical location)

If you wish to use an overnight mail service such as FedEx or UPS. Please use our physical location:

**DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION
BOARD OF REAL ESTATE APPRAISERS
76 NORTHERN AVENUE
GARDINER, ME 04345**

4. Temporary licenses are issued for a period of 6 months or the end of the assignment, whichever comes first. However, one six month extension may be requested for a specific assignment.

STATE OF MAINE DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION
OFFICE OF PROFESSIONAL & OCCUPATIONAL REGULATION

Mailing Address: 35 State House Station, Augusta, Maine 04333 **Courier/Delivery address:** 76 Northern Avenue, Gardiner, Maine 04345
Phone: (207) 624-8603 TTY users call Maine Relay 711 Fax: (207) 624-8637 www.maine.gov/professionallicensing

Frequently Asked Questions:

- **Where do I send my application?** Our mailing address is 35 State House Station, Augusta, Maine 04333-0035
- **Where are you physically located?** 76 Northern Avenue, Gardiner, Maine.
- **What hours are you open?** 8:00 AM to 5:00 PM weekdays.
- **Can I come to Gardiner to drop off my application?** Yes. You will not leave with a license, though.
- **Can I come to Gardiner to pick up my license?** No. Your license will be emailed to you.
- **How long does it take to process an application?** You can check our website: www.maine.gov/professionallicensing. Your license will show up as PENDING at first; as soon as your status is ACTIVE, you are authorized to practice.
- **How far back do I go answering the disciplinary action?** Any discipline, ever.

NOTICES

PUBLIC RECORD: This application is a public record for purposes of the Maine Freedom of Access Law (1 MRSA §401 et seq). Public records must be made available to any person upon request. This application for licensure is a public record and information supplied as part of the application (other than social security number and credit card information) is public information. Other licensing records to which this information may later be transferred will also be considered public records. Names, license numbers and mailing addresses listed on or submitted as part of this application will be available to the public and may be posted on our website.

SOCIAL SECURITY NUMBER: The following statement is made pursuant to the Privacy Act of 1974. Disclosure of your Social Security Number is mandatory. Solicitation of your Social Security Number is solely for tax administration purposes, pursuant to 36 MRSA §175 as authorized by the Tax Reform Act of 1975 (42 USC §405(c)(2)(C)(i)). Your Social Security Number will be disclosed to the State Tax Assessor or an authorized agent for use in determining filing obligations and tax liability pursuant to Title 36 of the Maine Revised Statutes. No further use will be made of your Social Security Number and it shall be treated as confidential tax information pursuant to 36 MRSA §191.

Before you seal the envelope, did you:

- Complete every item on the application (incomplete applications may be returned)
- Answer the disciplinary action disclosure question
- Sign and date your application
- Include correct amount (payable to Maine State Treasurer) or credit card information (plus signature)
- Make a copy of your application to keep for your records
- DO NOT SEND CASH.