

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

FEDERALLY REGULATED APPRAISAL MANAGEMENT COMPANY

SECTION 1: APPRAISER MANAGEMENT COMPANY INFORMATION								
LEGAL NAME OF COMPANY								
DOING BUSINESS AS NAME:								
PRINCIPAL BUSINESS ADDRESS								
CITY	STATE	STATE ZIP CODE						
PRINCIPAL BUSINESS PHONE:	FEDERAL TAX ID							
SECTION 2: CONTACT PERSON INFORMATION								
FIRST NAME:	MIDDLE INITIAL	LAST NAME						
MAILING ADDRESS								
CITY	STATE	ZIP CODE						
PHONE NUMBER EMAIL ADDRESS								
Is this federally regulated AMC in whole act as an appraiser refused, denied, carried YES	ancelled, revoked or surrer	ctly, owned by a person that has h ndered in lieu of discipline in any s NO	ad a license or certificate to tate?					
For any court or case related material, Materials or explanations may include, credential denial notices issued by an	, but are not limited to the f	following: adjudication orders, inve	nd the case number. stigation notices and					
Office Use Only: 4695 2632 (AMC)		Office Use Only Check # Amount: Cash # UN # Issue Date_ Exp. Date						

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MAINE BOARD OF REAL ESTATE APPRAISERS 35 STATE HOUSE STATION, AUGUSTA ME 04333 (207) 624-8522

SE	CTION	N 3: NATION	AL REGISTRY FE	E		
1.	appra		one state (Maine) e		y oversee an appraiser panel of 16 or more certific ged or contracted to perform appraisals in connect	
		YES			NO	
2.	licens	ed appraisers		state e	y oversee an appraiser panel of 25 or more certifice engaged or contracted to perform appraisals in	ed or
		YES			NO	
3.	many		n your panel (Main		lune 30 of the previous year (a 365 day period), hor rformed appraisals for a covered transaction (in)W
CA	LCUL	ATION INST	RUCTIONS			
Ste					ve is 25 or more, continue to step 2. If #1 above is , enter 0 in the Registry formula below in Step 3.	less
Ste	ep 2: E	Enter the num	ber from #3 above	into th	the Registry formula below and multiply by \$25.00).
Na	tional	Registry Fee		_ x \$2	\$25.00 =	-
kno rely	wledge upon th	and belief. By nis information a	submitting this applicated that this information	ion, I af n is trutl	ovided on this application is true and accurate to the best of affirm that the Office of Professional & Occupational Regular athful and factual. I also understand that sanctions may be on of my license if this information is found to be false.	
SI	GNATI	JRE			DATE	

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SECTION 4: PAYMENT

If applicable enclose check or money order payable to "State of Maine, Department of Professional and Financial Regulation" and mail to the address noted below. Alternatively you may fill out the credit card portion of the application and email it to the board at: 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

PAYMENT OPTIONS: Make checks payable to "State of Maine, Department of Professional and Financial Regulation" If you wish to pay by Mastercard or Visa, fill out the following:									
NAME OF CARD	HOLDER (please print)	FIRST	MIDDLE INIT	TAL	LAST				
MAILING ADDRE	SS OF CARDHOLDER (ple	ase print)							
I authorize the Department of Professional and Financial Regulation, Office of Professional & Occupational Regulation to charge my VISA MASTERCARD the following amount: \$ I UNDERSTAND THAT FEES ARE NON-REFUNDABLE									
Card number:	XXXX-XXXX-XXXX-XXX	X	Expiration Date	mm I yyyy					
SIGNATURE				DATE					

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.

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

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