



Maine Revenue Services PROPERTY TAX DIVISION

CERTIFIED MAINE ASSESSOR EXAM

The next Certified Maine Assessor exam will be held on Tuesday, November 14th in Augusta. The exam will begin at 8:00 and end at 4:30, with a 1/2-hour lunch break. The exam will be held in Room 101 of the Deering Building (90 Blossom Lane, Augusta).

The exam consists of five parts. A minimum score of 70 on each part is required to pass. If you don't pass all parts, you will only have to retake the parts on which you scored less than 70. For more information, see MRS Rule 205 on the Property Tax Division website, www.maine.gov/revenue/taxes/property-tax.

Part I of the exam will be passed out at 8:00 and must be completed within four hours. Part I covers Maine property tax law with 25 mostly multiple-part questions.

Reference materials are provided for this open-book part. Parts II-V will be given to the candidate once Part I is completed and the reference materials are turned in. Parts II-V each contain 50 multiple choice questions of a general information/problem solving nature. These parts do not have a specific time limit, but all parts, including Part I, must be completed by 4:30. No time adjustment will be made for late arrivals.

Only pencils and calculators will be permitted in the testing room. The calculator feature on a cell phone is not allowed. All other material necessary for the exam will be provided.

Registrations must be submitted with a \$25, non-refundable exam fee by Tuesday, October 31st.

REGISTRATION

Make check payable to *Maine Revenue Services*. Mail this form, with check, to *Maine Revenue Services - Property Tax Division, Attn: Chief of Training and Certification, P.O. Box 9106, Augusta, ME 04332*. If paying by credit card, email this form to cma.mrs@maine.gov. **Note:** Credit card information will be redacted and not stored by Maine Revenue Services after processing.

Name: _____

Address: _____

Home Phone: _____ Fax Number: _____

Work Phone: _____ Email Address: _____

Check this box if you would like your results emailed to you.

CREDIT CARD PAYMENT INFORMATION

Name on Card: _____ Expiration Date: _____

Card Number: _____ Visa MasterCard Discover

Billing Address: _____

E-mail Address for Receipt: _____

Phone Number: _____