

**APPRAISER CERTIFICATION  
AND LICENSURE BOARD**

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**APPRAISAL MANAGEMENT COMPANY  
BACKGROUND CHECK AUTHORIZATION**

**Each** subject individual, as defined in OAR 161-500-0000(6), must complete and sign the following:

Name:			Position or title:		
Home street address:			Home mailing address, if different:		
City:	State:	ZIP:	City:	State:	ZIP:
Home phone:		Office phone:	E-mail:		
Office street address:			Office mailing address, if different:		
City:	State:	ZIP:	City:	State:	ZIP:
Office phone: - -		Fax: - -			
Social Security number: - -		Date of birth (mm/dd/yyyy): - -			
Driver's License No./State of Issue:			Percentage of ownership:		
<p>Have you <b>EVER</b> entered a plea of nolo contendere, plead or been found guilty of or convicted of a <i>felony</i>? If yes, and the information has not been previously submitted in a prior application to the Board, on a separate sheet of paper fully explain the facts of the offense and identify the location of jurisdiction of the proceedings. Include a copy of <u>all</u> final court documents identifying charges and assessing penalties. Yes ___ No ___</p>					
<p>Have you <b>IN THE LAST TEN YEARS</b> entered a plea of nolo contendere, plead or been found guilty of or convicted of a <i>misdemeanor</i>? If yes, and the information has not been previously submitted in a prior application to the Board, on a separate sheet of paper fully explain the facts of the offense and identify the location of jurisdiction of the proceedings. Include a copy of <u>all</u> final court documents identifying charges and assessing penalties. Yes ___ No ___</p>					
<p>Have you <b>EVER</b> been reprimanded or fined or had a license, certificate or registration suspended, revoked, restricted, denied, or surrendered in this or any other state by any agency that has granted you a license, certificate or registration to engage in a regulated occupation, trade or profession? If yes, on a separate sheet of paper please explain and provide a copy of any documentation that describes the charges against you and the action taken by the agency. Yes ___ No ___</p>					

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