



135 W. Irvine Street, #301
 Richmond, Kentucky 40475
 Phone: 859-623-1658
 Fax: 859-623-2598
 www.kreab.ky.gov

Application for Appraisal Management Company Registration

TYPE OR PRINT CLEARLY IN INK. The application fee is **\$2,000 plus \$300 for the appraisal management company recovery fund, both are NON-REFUNDABLE**, and payable only by Check, Cashier Check or Certified Check to Kentucky Real Estate Appraisers Board. All other forms of payment will be returned.

1 Company's Legal Name:

2 Name under which Company will do business in Kentucky:

3 Contact person for application:

Name	Title	Email
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4 Main Address of Company:

Street Address		County	
City	State	Zip	
PO Box (if applicable)	City	State	Zip
Telephone	Fax	Email	

Send mail to Post Office Box

5 If company is domiciled in Kentucky, contact information for company's agent for service of process:

Name			
Street Address		County	
City	State	Zip	
Telephone	Fax	Email	

6 Name of Compliance Manager:

7 Legal Structure of Company:

- | | | | |
|----------------------|--------------------------|---------------------|--------------------------|
| Domestic Corporation | <input type="checkbox"/> | Foreign Corporation | <input type="checkbox"/> |
| Partnership* | <input type="checkbox"/> | Foreign LLC | <input type="checkbox"/> |
| Limited Partnership | <input type="checkbox"/> | Other** | <input type="checkbox"/> |
| Sole Proprietor | <input type="checkbox"/> | | |

*If general partnership, attach copy of written partnership agreement.

**If other type of entity, attach copy of organizational documents.

8 Employer Identification Number or Social Security Number:

9 Kentucky Secretary of State Identification Number, if required:

10 Indicate below if you are registered as an appraisal management company in any other state:

State	Regis. No.	From (Mo/Yr)	To (Mo/Yr)
State	Regis. No.	From (Mo/Yr)	To (Mo/Yr)
State	Regis. No.	From (Mo/Yr)	To (Mo/Yr)

11 Complete Attachment A: the name, street address, and contact information for any individual or business entity that owns ten percent (10%) or more of the Company.

12 Complete Attachment B: the name, street address, and contact information for any controlling person or managing principal.

13 Complete Attachment C: the name, street address, and contact information for all officers and directors

CHARACTER

14
Regarding Professional Licenses

	Yes	No
(1) Has any owner listed in Attachment A of this application ever had an appraisal license refused, denied, cancelled or revoked by the State of Kentucky or any other state?	<input type="checkbox"/>	<input type="checkbox"/>
(2) Are there currently any allegations pending against any owner in connection with an appraiser license in Kentucky or any other state?	<input type="checkbox"/>	<input type="checkbox"/>

If either of the answers are "yes", provide a copy of the licensing agency's order, any other documentation regarding the case, and a complete written explanation for each matter.

Regarding Criminal Offenses

- (1) Has **any owner** listed in Attachment A of this application ever been convicted of or pleaded guilty or no contest to any criminal offense in Kentucky or in any other state?
- (2) Are there currently any criminal charges now pending against **any owner** listed in this application in Kentucky or in any other state?

If either of the answers are "yes", provide a copy of the court judgment, arrest warrant or bill of indictment, and include a release from probation or parole, if appropriate.

"Criminal offenses" and "criminal charges" include all criminal matters except speeding or parking violations. It DOES include driving while under the influence of alcohol or drugs. If you believe a charge has been erased or expunged, you must check with the appropriate court before completing this section.

All Officers of the Company must provide a criminal background check compliant with the requirements of KRS 324A.152

15 List any other names under which you do business in Kentucky. Attach a copy of the Certificate of Assumed Name filed for each name within the Commonwealth of Kentucky.

Name _____ County _____

Name _____ County _____

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CERTIFICATIONS:

- (1) I certify that this Appraisal Management Company has a system and process in place to verify that a person being added to the appraiser panel of the appraisal management company holds a license in good standing in this State pursuant to the Kentucky Appraisers Act if a license or certification is required to perform appraisals.
- (2) I certify that this Appraisal Management Company has a system in place to require that appraisers inform the appraisal management company of their areas of geographic competency, the types of properties the appraiser is competent to appraise, and the methodologies the appraiser is competent to perform.
- (3) I certify that this Appraisal Management Company has a system in place to review the work of all independent appraisers that are performing real estate appraisal services for the appraisal management company on a periodic basis to validate that the real estate appraisal services are being conducted in accordance with the Uniform Standards of Professional Appraisal Practice.
- (4) I certify that this Appraisal Management Company has a dispute resolution process that allows users of the appraisal report to request that the appraiser consider additional property information, provide further detail, substantiation, or explanation for the appraiser's value conclusion, or to correct errors in an appraisal report.
- (5) I certify that this Appraisal Management Company maintains a detailed record of each service request that it receives and the independent appraiser that performs the residential real estate appraisal services for the appraisal management company.

ATTACHMENTS

I have attached the following:

- (1) Attachment A: The name, street address and contact information, including a business email address, for any individual or business entity that owns ten percent (10%) or more of the Appraisal Management Company;
- (2) Attachment B: The name, street address, and contact information, including a business email address, for any controlling person or managing principal;
- (3) Attachment C: The name, street address, and contact information, including a business email address, for all officers and directors;
- (4) Attachment D: If the company is not domiciled in Kentucky, the documents required by KRS 324A.152(2)(b)2;
- (5) Attachment E: A copy of the written partnership agreement, if applicable;
- (6) Attachment F: A copy of the organizational documents, if applicable;
- (7) Attachment G: All national and state criminal background checks required by KRS 324A.152(3); and
- (8) Attachment H: All certifications required by KRS 324A.152(2)(f)1 through 6.

THIS AFFIDAVIT IS TO BE EXECUTED BY APPLICANT BEFORE A NOTARY PUBLIC:

The undersigned, in making this application to the Kentucky Real Estate Appraisers Board for registration as an Appraisal Management Company under the provisions of KRS 324A.152 swears (or affirms) that he (or she) has been designated by the Appraisal Management Company to make this application on their behalf, and that all information provided in connection with this application, including certifications and attachments, is true to the best of his (or her) knowledge and belief, with the understanding that any omissions, inaccuracies or failure to make full disclosures may be deemed sufficient reason to deny registration or to withhold renewal of or suspend or revoke a registration issued by the Board.

SIGNATURE OF APPLICANT: _____

Printed name: _____ Title: _____

Sworn and subscribed to before me this _____ day of _____ 20_____

(Name of Notary Public, please print)

(Signature of Notary Public)

My Commission expires _____

KENTUCKY REAL ESTATE APPRAISERS BOARD

135 W. IRVINE STREET, SUITE 301
RICHMOND, KENTUCKY 40475
Phone: (859)623-1658 Fax: (859)623-2598
Website: www.kreab.ky.gov

DESIGNATION OF COMPLIANCE MANAGER

An AMC must designate one person as the Compliance Manager. The Compliance Manager shall be a certified real estate appraiser on active status and in good standing in Kentucky or any other state. The Compliance Manager is responsible for ensuring that the AMC operates in Compliance with state law.

Designation of the Compliance Manager must be made on this form. All items must be completed. If any item is not applicable, indicate "N/A". This application must be completed by the proposed Compliance Manager.

PLEASE TYPE OR PRINT CLEARLY!

AMC Name: _____

Compliance Manager Information:

Full Name: _____

Mailing Address: _____

Email Address: _____

Phone: (_____) _____ Fax: (_____) _____

Appraisal Certification: State: _____ Number: _____ Certified residential General
State: _____ Number: _____ Certified residential General

I. Regarding Appraiser Certification:

Have you ever had any disciplinary action taken against your appraiser certificate in KY or any other state? Yes No

Are there currently any charges pending against you in connection with your appraiser certificate in KY or any other state? Yes No

IF ANY OF THESE ANSWERS ARE "YES," PROVIDE A COPY OF THE LICENSING AGENCY ORDER AS WELL AS ANY OTHER DOCUMENTATION REGARDING THE CASE.

YOU MUST ALSO PROVIDE A COMPLETE WRITTEN EXPLANATION OF EACH CHARGE OR CONVICTION WITH THIS APPLICATION.

II. Regarding Criminal Offenses:

Have you ever been convicted of a felony? Yes No

Within the past 10 years, have you been convicted Yes No of a misdemeanor?

Are there currently any criminal charges now pending against you in KY or any other state? Yes No

“CRIMINAL CHARGES” DO NOT INCLUDE SPEEDING OR PARKING VIOLATIONS. THEY DO INCLUDE DRIVING WHILE INTOXICATED OR WHILE UNDER THE INFLUENCE OF ALCOHOL OR DRUGS.

IF YOU BELIEVE A CHARGE HAS BEEN ERASED FROM YOUR RECORD OR EXPUNGED, YOU MUST CHECK WITH THE APPROPRIATE COURT TO MAKE SURE THIS HAS HAPPENED.

IF ANY OF THESE ANSWERS ARE “YES,” PROVIDE A COPY OF THE COURT JUDGMENT, ARREST WARRANT, OR BILL OF INDICTMENT. INCLUDE A RELEASE FROM PROBATION OR PAROLE IF APPROPRIATE.

YOU MUST ALSO PROVIDE A COMPLETE WRITTEN EXPLANATION OF EACH CHARGE OR CONVICTION WITH THIS APPLICATION.

III. Have you ever been known by any other names? Yes No

Other names _____

All Compliance managers must provide a criminal background check compliant with the requirements of KRS 324A.152

Signature of Applicant: I certify that the information provided in this application is true and correct to the best of my knowledge. I understand that any omission, inaccuracy or failure to make full disclosure constitutes grounds for denial or withdrawal of approval of my designation of Compliance Manager.

Signature: _____ Date: _____

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CONSENT TO SERVICE OF PROCESS AND PLEADINGS

Know all men by these presents:

Pursuant to the requirements of KRS 324A.150 through 164, the undersigned applicant for registration as an appraisal management company in Kentucky.

Print Name of Company

does hereby irrevocably consent, stipulate and agree that suits, actions, and administrative proceedings may be commenced against such applicant in the courts and agencies of this State, by the service of any process or pleading authorized by the laws of this State on the Executive Director of the Kentucky Real Estate Appraisers Board, and that service of such process or pleadings upon said Director shall be taken and held in all courts to be as valid and binding as if the service had been made upon said applicant in the Commonwealth of Kentucky.

Name of Person Executing Consent (*Please Print*)

Title

Signature of Person Executing Consent

Street Address of Person Executing Consent

City

State

Zip

State of _____

County of _____

Before me personally appeared the above-named individual who acknowledged the execution of the foregoing instrument for the purpose set forth therein.

WITNESS my hand and official seal, this _____ day of _____, 20_____.

(Affix Seal)

Notary Public

My Commission expires: _____

FINGERPRINTING INSTRUCTION SHEET

(AFFIX SEAL)

County _____ State _____

Fingerprint cards can be obtained at:

- a. Kentucky State Police Post, or
- b. United Parcel Services (UPS) mailing office, or
- c. Any local police station or sheriff's office trained to do fingerprinting

*Please check with your state's law enforcement agency regarding fees, method of fingerprinting, hours of operation etc.

Digital fingerprints are preferred and accepted if fingerprints are transferred to:

- a. The fingerprint card, or
- b. An FD-258 fingerprint card

*ORI number (KY920222Z) MUST BE placed on the card

*Specify "KRS-324a.152, KY Real Estate Appraisers Board" as the reason fingerprinted

*Do not fold or staple the fingerprint card

*All fingerprints must be rolled in black ink only

Completed fingerprint card must be sent:

1. Directly to the Kentucky State Police at:

Kentucky State Police
Records Branch
1266 Louisville Road
Frankfort, KY 40601

2. With a check or money order:

- a. In the amount of \$36.50
- b. Made payable to Kentucky State Treasurer

Complete the following required fields of the fingerprint card:

Last, First, and Middle Name

Aliases

Signature and Residence of Person Being Fingerprinted

Date and Signature of Official Taking Fingerprints

Date of Birth

Citizenship

Sex

Race

Height

Weight

Eye Color

Hair Color

Place of Birth (State or Country)

Social Security Number

Note:

1. All of the required fields listed above must be completed on the fingerprint card or the card will be returned to you for completion.

2. Fingers to be printed must be clean and dry. Wiping the individual's fingers with an alcohol swab and drying them should prevent perspiration from being a problem.

3. Roll each finger from nail to nail in the appropriate space taking care to lift each finger up and away after rolling, to avoid smudging.
4. Plain impressions are printed last, at the bottom of the card. The technician simultaneously presses the individual's four fingers (on the right hand), keeping the fingers together. The process is repeated for the left hand. Print both thumbs simultaneously in the plain impression thumb blocks.

FINGERPRINT USE AND CHALLENGE INFORMATION

The Kentucky Real Estate Appraisers Board has the legal authority, KRS 324A.152, to require a criminal background investigation of an applicant for licensure by requiring fingerprinting of the applicant.

In accordance with FBI policy, please read the following information regarding the use and dissemination/restriction of the fingerprint report obtained from the FBI :

“Under provisions set forth in Title 28, code of Federal Regulations (CFR), Section 50.12, both governmental and nongovernmental entities authorized to submit fingerprints and received FBI identification records must notify the individuals fingerprinted that the fingerprints will be used to check the criminal history records of the FBI. Identification records obtained from the FBI may be used solely for the purpose requested and may not be disseminated outside the receiving department, related agency, or other authorized entity. If the information on the record is used to disqualify an applicant, the official making the determination of suitability for licensing or employment shall provide the applicant the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record. The deciding official should not deny the license or employment based on the information in the record until the applicant has been afforded a reasonable time to correct or complete the information, or has declined to do so. An individual should be presumed not guilty of any charge/arrest for which there is no final disposition stated on the record or otherwise determined. If the applicant wishes to correct the record as it appears in the FBI's CJIS division records system, the applicant should be advised that the procedures to change, correct or update the record are set forth in Title 28, CFR, Section 16.34.”