



STATE BOARD OF CERTIFIED REAL ESTATE APPRAISERS

P.O. Box 2649
Harrisburg, PA 17105-2649

Telephone: 717-783-4866
State Board of Certified Real Estate Appraisers
2601 North Third Street
Harrisburg PA 17110

Courier Address:
Fax: 717-705-5540
E-mail: st-appraise@pa.gov
Website: www.dos.pa.gov/real

APPRAISAL MANAGEMENT COMPANY
CHANGE OF INFORMATION

Make sure this is the most recent application by checking our website: www.dos.pa.gov/real

FEE: \$35.00 Non-refundable application fee. Check or money order made payable to the "Commonwealth of Pennsylvania." Fee is non-refundable, non-transferable and subject to change. \$20.00 charge for all checks returned "not paid" regardless of the reason for non-payment. If a pending application is older than one year from the date submitted and the applicant wishes to continue the application process, the board shall require the applicant to submit a new application including the required fee. In order to complete the application process, many of the supporting documents associated with the application cannot be more than six months from the date of issuance.

SECTION 1: NOTICE TO APPRAISAL MANAGEMENT COMPANY

PURSUANT TO 49 PA. CODE § 36.414, APPRAISAL MANAGEMENT COMPANIES MUST REPORT A CHANGE IN THE INFORMATION REQUIRED UNDER 49 PA. CODE § 36.404 (RELATING TO CONTENT OF APPLICATION) WITHIN 30 DAYS, INCLUDING INFORMATION RELATING TO DISCIPLINARY HISTORY OR CRIMINAL HISTORY. PLEASE REVIEW THE BOARD'S REGULATIONS TO DETERMINE WHAT INFORMATION MUST BE REPORTED TO THE BOARD. YOU MAY ACCESS THE BOARD'S REGULATIONS AT THE WEBSITE NOTED ABOVE.

SECTION 2: PLEASE PRINT OR TYPE

Form with 4 main sections: 1. APPRAISAL MANAGEMENT COMPANY NAME, 2. APPRAISAL MANAGEMENT COMPANY REGISTRATION NUMBER, 3. MAILING ADDRESS (with sub-fields for STREET, CITY, STATE, ZIP), 4. STREET ADDRESS, IF DIFFERENT FROM MAILING ADDRESS (with sub-fields for STREET, CITY, STATE, ZIP).

SECTION 2 CONTINUED

5. CONTACT INFORMATION

NAME

TELEPHONE NUMBER

EMAIL ADDRESS

6. DESCRIPTION OF CHANGE OF INFORMATION:

SECTION 3: CERTIFICATION STATEMENT FOR COMPLIANCE PERSON

I CERTIFY THAT I POSSESS THE AUTHORITY TO SUBMIT AND SIGN THIS APPLICATION AND TO EXECUTE THE CERTIFICATIONS AND VERIFICATIONS HEREIN.

BY SIGNING BELOW, I VERIFY THAT THE APPRAISAL MANAGEMENT COMPANY IS IN COMPLIANCE AND WILL CONTINUE TO COMPLY WITH REQUIREMENTS OF THE APPRAISAL MANAGEMENT CERTIFICATION REGISTRATION ACT AND THE BOARD'S REGULATIONS, THE PROVISIONS OF THE FINANCIAL INSTITUTIONS REFORM, RECOVERY AND ENFORCEMENT ACT OF 1989, AS AMENDED, (FIRREA), THE REAL ESTATE APPRAISER CERTIFICATION ACT (REACA), REAL ESTATE APPRAISAL REFORM AMENDMENTS (REARA) AND THE TRUTH IN LENDING ACT (TILA) THAT RELATE TO APPRAISAL STANDARDS OR APPRAISAL MANAGEMENT SERVICES.

I VERIFY THAT THIS FORM IS IN THE ORIGINAL FORMAT AS SUPPLIED BY THE DEPARTMENT OF STATE AND HAS NOT BEEN ALTERED OR OTHERWISE MODIFIED IN ANY WAY. I AM AWARE OF THE CRIMINAL PENALTIES FOR TAMPERING WITH PUBLIC RECORDS OR INFORMATION PURSUANT TO 18 Pa. C.S. § 4911.

ADDITIONALLY, I VERIFY THAT THE STATEMENTS IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. I UNDERSTAND THAT ANY FALSE STATEMENT MADE IS SUBJECT TO THE PENALTIES OF 18 Pa. C.S. § 4904 (RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES) AND MAY RESULT IN THE DENIAL, SUSPENSION OR REVOCATION OF THE REGISTRATION OF THE APPRAISAL MANAGEMENT COMPANY OR AUTHORIZATION TO ACT AS A COMPLIANCE PERSON.

COMPLIANCE PERSON SIGNATURE _____ DATE _____