STATE BOARD OF CERTIFIED REAL ESTATE APPRAISERS

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State Board of Certified Real Estate Appraisers

PO Box 2649

Harrisburg, PA 17105-2649

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CONSENT TO SERVICE FORM

I,	, HEREBY AGREE
(Name of Applicant) THAT SERVICE OF ORIGINAL PROCESS OR OTHER LEGAL NOTICE UPON	
SHALL HAVE THE SAME FOR	RCE AND EFFECT AS IF SERVED PERSONALLY UPON ME. IN
THE EVENT THAT SERVICE O	CANNOT BE MADE AND EFFECTED AT THE PERMANENT
ADDRESS STATED HEREIN,	I AGREE THAT SERVICE OF ORIGINAL PROCESS OR OTHER
LEGAL NOTICE CAN BE MAD	DE UPON ME BY MAILING A COPY OF SAME TO THE ADDRESS
OF THE LICENSING/CERTIFIC	CATION APPRAISAL AGENCY OF MY
LICENSURE/CERTIFICATION	LISTED IN SECTION ONE OF THE WITHIN APPLICATION FORM.
I ATTEST THAT I HAVE READ	, UNDERSTAND AND WILL ABIDE BY ALL APPRAISER LAWS
AND RULES AND REGULATION	ONS IN EFFECT IN THE COMMONWEALTH OF PENNSYLVANIA.
FURTHER AGREE TO COOPE	ERATE WITH ANY INVESTIGATION INITIATED AGAINST ME BY
THE COMMONWEALTH OF P	ENNSYLVANIA IN CONNECTION WITH MY APPRAISAL OF REAL
PROPERTY WHILE ON ASSIG	GNMENT IN THE COMMONWEALTH.
	(SIGNATURE OF APPLICANT)
NOTARY SEAL & SIGNATURE	

(DATE)