

**FOR OREAB USE ONLY**

Check No: \_\_\_\_\_

Check Date: \_\_\_\_\_

Amount: \_\_\_\_\_



**OKLAHOMA REAL ESTATE APPRAISER BOARD**

3625 NW 56th St, Ste 100, Oklahoma City, OK 73112  
 (405) 521-6636, Fax 522-6909  
[www.reab.oid.ok.gov](http://www.reab.oid.ok.gov)

2x2 PHOTOGRAPH

**APPLICATION FOR REAL ESTATE APPRAISER CREDENTIAL**

All questions on this application must be answered fully and completely as required. A recent 2x2 photograph (taken within the last six months) must be attached upon submission of the application. Disclosure of applicant's social security account number is mandatory pursuant to 56 O.S. § 240.21(A). The applicant must complete the Oath.

- LEVEL OF LICENSURE APPLYING FOR:** (Check One)
- \_\_\_\_\_ State Certified General Real Estate Appraiser
- \_\_\_\_\_ State Certified Residential Real Estate Appraiser
- \_\_\_\_\_ State Licensed Real Estate Appraiser
- \_\_\_\_\_ Trainee Appraiser

- TYPE OF APPLICATION:** (Check One)
- \_\_\_\_\_ Original Licensure (by examination)
- \_\_\_\_\_ Upgrade of existing license/certification (by examination)
- \_\_\_\_\_ Reinstatement
- \_\_\_\_\_ Transfer from another state

1. \_\_\_\_\_  
 FULL LEGAL NAME: (Last, First, Middle) SOCIAL SECURITY NUMBER

\_\_\_\_\_  
 NAMES PREVIOUSLY USED: Maiden, previously married, previously used, etc.

\_\_\_\_\_  
 LIST NAMES YOU USE OR HAVE USED OTHER THAN YOUR LEGAL NAME, INCLUDING NICKNAMES

2. \_\_\_\_\_  
 RESIDENCE: (Street Address) (Mailing Address, if different) (City)

\_\_\_\_\_  
 (County) (State) (ZIP Code) (Telephone Number)

3. \_\_\_\_\_  
 BUSINESS: (Mailing Address) (City) (State) (ZIP Code) (Telephone Number)

4. All mail should be directed to: OFFICE: \_\_\_\_\_ HOME: \_\_\_\_\_

5. Firm or Trade Name under which you anticipate doing business: \_\_\_\_\_

6. Record of Employment for past five years: Start with present employment and work backward.

DATES		NATURE OF WORK	EMPLOYER NAME & ADDRESS
FROM	TO		

7. DATE/PLACE OF BIRTH: \_\_\_\_\_  
 (Date) (City) (State)

8. HIGH SCHOOL(S) ATTENDED:  
 Name and Address of School Highest Level Attained Dates Attended

COLLEGE(S) OR UNIVERSITY(S) ATTENDED:

Name and Address of School	Highest Level Attained	Dates Attended

NOTE: College or University means an institution accredited by the Commission on Colleges, a regional or national accreditation association, or by an accrediting agency that is recognized by the U.S. Secretary of Education. If applying for Certified General or Residential, attach a copy of degree certificate or transcript showing qualifying courses or degree attained.

9. Do you have a current Oklahoma Real Estate Appraiser Certificate or License? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Have you previously held an Oklahoma Real Estate Appraiser Certificate or License? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If Yes to either, enter the type and number of the Certificate or License: \_\_\_\_\_

10. Do you have, or have you ever had, a real estate appraiser credential in any other licensing jurisdiction? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
If Yes, attach an original Certification History (Letter of Good Standing) from each jurisdiction that you are currently active in.

11. Have you ever been rejected for appraiser Licensure/Certification in this or another licensing jurisdiction? Yes: \_\_\_\_\_ No: \_\_\_\_\_  
If Yes, please attach a letter explaining all details.

12. a) Has this or any other state ever refused, revoked, suspended, fined or terminated any occupational credential you may have held? Yes: \_\_\_\_\_ No: \_\_\_\_\_

b) Have the authorities of any state ever called you before them for any alleged violation(s) of laws involving any occupational license you may have held or taken administrative action against any such Occupational license? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**NOTICE:** If you answered yes to either of questions 12a or 12b, provide details in your own words on a separate sheet and attach copies of appropriate documents.

13. a) Have you ever been convicted of, including a conviction based upon a plea of guilty or nolo contendere, a felony in a domestic or foreign court; Yes: \_\_\_\_\_ No: \_\_\_\_\_

b) during the two (2) year period immediately preceding the date of the application for licensing; Yes: \_\_\_\_\_ No: \_\_\_\_\_

c) at any time preceding the date of application, if such felony involved an act of fraud, dishonesty or breach of trust or money laundering. Yes: \_\_\_\_\_ No: \_\_\_\_\_

14. Have you ever received an adverse decision or judgment against you in a criminal, civil or administrative action related to your business or professional activities? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**NOTICE:** If you answered yes to questions 13 or 14 above, provide details in your own words on a separate sheet and attach a certified copy of final judgment and sentencing.

15. Are you a United States Citizen? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If Yes, attach documentary proof of citizenship. Common forms of proof of citizenship are as follows, a copy of:

- \_\_\_\_\_ Birth certificate showing birth in one of the 50 states within the U.S. or its outlying possessions.
- \_\_\_\_\_ United States passport (except limited passports, which are issued for periods of less than five years).
- \_\_\_\_\_ Report of birth abroad of a U.S. citizen (FS-240) (issued by the Department of State).
- \_\_\_\_\_ Certificate of birth (FS-545).
- \_\_\_\_\_ Certificate of Naturalization (N-550 or N-570).
- \_\_\_\_\_ Certificate of Citizenship (N-560 or N-561).
- \_\_\_\_\_ U.S. Citizen ID Card (I-197) (issued by the INS).
- \_\_\_\_\_ American Indian Card bearing classification code "KIC" and a statement on the reverse.
- \_\_\_\_\_ Adoption finalization papers showing the child's name and place of birth in one of the 50 states.

Contact the Board's administrative office for additional information.

If No, attach documentary proof of qualified alien status. Common forms of proof of qualified alien status are as follows, a copy of:

- \_\_\_\_\_ INS Form 551 (Alien Registration Receipt Card, commonly referred to as a "green card.")
  - \_\_\_\_\_ Unexpired temporary INS Form 551 stamp in foreign passport or on INS Form I-94.
  - \_\_\_\_\_ INS Form I-94 annotated § 203(a)(7), § 207, § 208, or § 212(d)(5).
- There are other forms of acceptable proof. Contact the Board's administrative office for additional information.

16. Are you a resident of the State of Oklahoma? Yes: \_\_\_\_\_ No: \_\_\_\_\_

17. What is your email address? \_\_\_\_\_

## QUALIFYING APPRAISAL EDUCATION HISTORY

In the spaces below, list each qualifying course for which credit is desired. Do not list courses that were taken for continuing education which are not approved as qualifying courses.

**FOR EACH COURSE LISTED BELOW, ATTACH A DOCUMENT DEMONSTRATING THAT YOU HAVE SUCCESSFULLY COMPLETED THE COURSE AND ACHIEVED A PASSING SCORE ON THE EXAMINATION.**

<b>COURSE NAME:</b> <u>National Uniform Standards of Professional Appraisal Practice (REQUIRED)</u>
Course No.: _____ Hours of Credit: _____
Sponsoring Organization or Provider: _____
Instructor(s): _____
Location: _____ Date(s): _____
<b>COURSE NAME:</b> _____
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Sponsoring Organization or Provider: _____
Instructor(s): _____
Location: _____ Date(s): _____
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Course No.: _____ Hours of Credit: _____
Sponsoring Organization or Provider: _____
Instructor(s): _____
Location: _____ Date(s): _____

Use additional copies of this page to summarize education if necessary.

## QUALIFYING APPRAISAL EDUCATION HISTORY CONTINUED

<b>COURSE NAME:</b> _____ Course No.: _____ Hours of Credit: _____ Sponsoring Organization or Provider: _____ Instructor(s): _____ Location: _____ Date(s): _____
<b>COURSE NAME:</b> _____ Course No.: _____ Hours of Credit: _____ Sponsoring Organization or Provider: _____ Instructor(s): _____ Location: _____ Date(s): _____
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Use additional copies of this page to summarize education if necessary.

## QUALIFYING APPRAISAL EDUCATION HISTORY CONTINUED

<b>COURSE NAME:</b> _____	
Course No.: _____	Hours of Credit: _____
Sponsoring Organization or Provider: _____	
Instructor(s): _____	
Location: _____	Date(s): _____

  

<b>COURSE NAME:</b> _____	
Course No.: _____	Hours of Credit: _____
Sponsoring Organization or Provider: _____	
Instructor(s): _____	
Location: _____	Date(s): _____

  

<b>COURSE NAME:</b> _____	
Course No.: _____	Hours of Credit: _____
Sponsoring Organization or Provider: _____	
Instructor(s): _____	
Location: _____	Date(s): _____

## QUALIFYING APPRAISAL EXPERIENCE REPORT

(APPLICANTS FOR TRAINEE APPRAISER: LEAVE THIS SECTION BLANK.)  
 (APPLICANTS FOR TRANSFER: LEAVE THIS SECTION BLANK.)  
 (APPLICANTS FOR REINSTATEMENT: CONTACT BOARD OFFICE FOR GUIDANCE.)

Applicants for Certified General, Certified Residential, and State Licensed Real Estate Appraiser must complete the following:

"I certify that the experience listed below was extracted from my appraisal log, a copy of which is attached, which is incorporated herein by reference. Hours claimed herein are actual hours worked and have been extracted from the attached appraisal log." Each is supported by adequate written reports or file memoranda, and each will be made available upon request by the Oklahoma Real Estate Appraiser Board.

YEAR:											TOTALS	
	No	Hrs*	No	Hrs*	No	Hrs*	No	Hrs*	No	Hrs*	No	Hrs*
<b>TYPE APPRAISALS</b>												
Agricultural and/or Vacant Land												
Comm'l, Indust, & Multi-Family												
Specialized												
Non-residential Review												
<b>TOTAL NON-RES</b>												
Residential 1-4 Units												
Residential 1-4 Unit Review												
<b>TOTALS</b>												

## OATH

I, \_\_\_\_\_, being first duly sworn, state that I have read the within and foregoing application and that the answers supplied by me therein, including but not limited to those related to my experience and education, and all supporting documents attached, are true and correct to the best of my knowledge and belief. Further, I state that I understand the provisions of, and will comply with, the Oklahoma Certified Real Estate Appraisers Act and the Rules of the Oklahoma Real Estate Appraiser Board in all my conduct under the certification or licensure. I understand and acknowledge that an intentional misstatement of any fact required to be disclosed on this application constitutes a violation of the Oklahoma Certified Real Estate Appraisers Act and shall be cause for refusal or revocation of this certification. I understand and agree that the Oklahoma Real Estate Appraiser Board may conduct any background investigation it should deem necessary to include verification of any and all information provided by me herein.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

State of: \_\_\_\_\_  
County of: \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

My Commission expires: \_\_\_\_\_

My Commission Number is: \_\_\_\_\_

## EDUCATION & EXPERIENCE PREREQUISITES

The education and experience requirements for each of the four levels of real estate appraiser credential issued by the Oklahoma Real Estate Appraiser Board are specified by REA Form 9.

## FEES

Those individuals applying for original licensure, or those considered a "new applicant", must include two (2) duplicate sets of fingerprints on the appropriate Civil Applicant Cards which can be obtained from the Real Estate Appraiser Board upon request. In addition to the fee referenced below, you must also remit \$41.00 for payment of the OSBI/FBI background check.

**ATTENTION:** YOUR FINGERPRINTS WILL BE USED TO CHECK CRIMINAL RECORD INFORMATION FROM THE SYSTEMS OF THE OSBI AND FBI. THE FBI WILL RETAIN YOUR FINGERPRINTS AND ASSOCIATED INFORMATION/BIOMETRICS AND, WHILE RETAINED, YOUR FINGERPRINTS WILL CONTINUE TO BE COMPARED AGAINST OTHER FINGERPRINTS SUBMITTED TO OR RETAINED BY THE FBI. IF NECESSARY, YOU WILL BE GIVEN AN OPPORTUNITY TO COMPLETE OR CHALLENGE THE ACCURACY OF THE INFORMATION CONTAINED IN THE REPORT OF THE OSBI AND FBI. THE PROCEDURE FOR OBTAINING A CHANGE, CORRECTION, OR UPDATING OF AN FBI IDENTIFICATION RECORD ARE SET FORTH IN TITLE 28, CFR, 16.34. FOR INFORMATION ON UPDATING THE NATIONAL CRIMINAL HISTORY RECORD VISIT FBI.GOV OR <https://www.fbi.gov/about-us/cjis/identity-historysummary-checks/challenge-of-an-identity-history-summary>.

IF THE APPLICANT RECEIVES A DOCUMENT THAT UPDATES THE CRIMINAL HISTORY RECORD, THE APPLICANT SHOULD FORWARD A CERTIFIED COPY OF THE DOCUMENT TO THE FBI AND THE REPOSITORY IN THE STATE WHERE THE ARREST OCCURRED.

THE REAL ESTATE APPRAISER BOARD WILL NOT DENY YOUR APPLICATION UNTIL YOU HAVE BEEN AFFORDED A REASONABLE OPPORTUNITY TO CORRECT OR COMPLETE THE RECORD, OR UNTIL YOU HAVE DECLINED TO DO SO.

Those individuals applying for original licensure as a Trainee Appraiser must include a \$300.00 credentialing fee with this application and provide an original REA Form 8, Report of Supervisory Relationship.

Those individuals applying for original licensure by examination at a level other than Trainee Appraiser must include a non-refundable application fee with this submission, as follows: Applicants for State Licensed Appraiser or State Certified Residential Appraiser must include a remittance in the amount of \$150.00. Those applying for State Certified General Appraiser must include a remittance in the amount of \$225.00.

Those individuals who have established a bona-fide residence in Oklahoma and are applying for transfer of their credential from another licensing jurisdiction to Oklahoma should include a \$340.00 remittance with this application.

Those applying for reinstatement of an Oklahoma real estate appraiser credential should contact the Board office for guidance.

**Submissions must be received and administratively approved at least five (5) working days prior to a Board meeting or it will be held over until the following meeting.**