



# APPLICATION FOR CERTIFIED RESIDENTIAL APPRAISER

P.O. Box 12188, Austin, Texas 78711-2188

FEE'S	RECEIPT NUMBER	AMOUNT	MONEY TYPE	DATE RECEIVED
CERTIFIED RESIDENTIAL APPLICATION		\$465.00		

DO NOT WRITE ABOVE THIS LINE

**ALL INFORMATION MUST BE TYPED OR PRINTED IN INK. MAKE CHECKS OR MONEY ORDERS PAYABLE TO TALCB. APPLICANTS WILL BE REQUIRED TO PAY A NATIONAL REGISTRY FEE OF \$80.00 AFTER ALL REQUIREMENTS ARE MET. FEES ARE NON-REFUNDABLE.**

PLEASE NOTE: An applicant may not take the examination until the application has been processed and the education and experience requirements have been met. All requirements of the application, including fingerprinting for a criminal history check, must be satisfied within 12 months after the date the application is received by TALCB or the application will expire.

<b>1. Full Legal Name:</b> _____ <div style="display: flex; justify-content: space-between; width: 100%; font-size: small;"> <span>Last</span> <span>First</span> <span>Middle</span> </div>				
<b>2. Social Security Number:</b> _____		<b>3. Drivers License or State ID Number:</b> _____ <div style="text-align: right; font-size: small;">State</div>		
<b>4. Date of Birth:</b> _____		<b>5. Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female		
<b>6. Ethnic Group:</b> <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Decline to respond <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Other (specify): _____				
<b>7. Mailing Address and Contact Information: (Post Office Box may be used)</b>  _____ Number, Street and Apt No.  City _____ State _____ Zip Code _____ Phone Number _____  Fax Number _____ E-mail Address _____				
<b>8. Place of Business Address: (Must be a fixed street address, not a Post Office Box)</b>  _____ Number, Street and Suite No.  City _____ State _____ Zip Code _____ Phone Number _____				

9. List all names (maiden, aliases, nicknames, etc.) by which you have been known.

\_\_\_\_\_

\_\_\_\_\_

10. Provide the information indicated concerning each "professional or occupational license" that you currently hold, have held in the past five years, or for which you are currently applying. As used herein, a "professional license" is any state or federal license, permit, registration, or certification that is required to engage in a regulated business or activity.

License Type	License No.	Jurisdiction	Issue Date	Exp/Term Date	Status
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

11. Have you ever (1) had any professional or occupational license or certification suspended, canceled or revoked; (2) received a reprimand or disciplinary action; (3) surrendered a license or certification pending disciplinary action; or (4) had an application for such denied in Texas or any other state?  Yes  No  
If YES, submit a complete written explanation and appropriate documentation such as final orders, etc.

12. Are there any pending complaints, investigations, or disciplinary hearings against any professional or occupational licenses or certifications you hold?  Yes  No  
If YES, submit a complete written explanation and appropriate documentation such as final orders, etc.

13. Have you ever (1) been convicted of or pleaded *nolo contendere* to a criminal offense (Include ALL felonies and misdemeanors, including DWI and DUI. You do not have to include traffic tickets); (2) been placed on probation, community supervision, or deferred adjudication; or (3) are there any criminal charges pending against you?  Yes  No  
If the answer to (1), (2), or (3) is YES, submit copies of all indictments, information, judgments, orders and charges, and a written explanation.

14. Have you ever had a civil judgment rendered against you, or are there any civil suits pending against you?  Yes  No  
If YES, submit a complete written explanation and copies of all petitions and judgments.

15. Is education to meet the current education requirements being submitted at this time?  Yes  No  
If YES, submit photocopies of transcripts and/or course completion certificates.

16. Is experience to meet TALCB's requirements being submitted at this time?  Yes  No  
If YES, submit photocopies of your experience on TALCB's Appraisal Experience Log along with an Appraisal Experience Certification and/or PAREA certificate.

17. Do you wish to use experience previously submitted to TALCB in connection with another action?  Yes  No  
If YES, provide the type of application and the approximate date it was submitted to TALCB:

\_\_\_\_\_

CERTIFICATION OF APPLICANT

I certify that I have read and understand this application and that the answers given herein are true, correct and complete. I will furnish all additional information or documentation requested by the Texas Appraiser Licensing and Certification Board (TALCB) for verification of the information given in this application. I understand that failing to provide information or providing information that is false, misleading or fraudulent is grounds for denial of this application or revocation of my license.

I authorize TALCB to conduct any investigations of me as authorized by law or TALCB rules. I understand that information revealed in an investigation may be cause for denial of the application even though other requirements for a license have been met and that if an investigation is necessary, it may not be conducted until I have passed the examination. I further understand that information submitted in conjunction with this application may be subject to public disclosure or inspection in accordance with the Public Information Act (Chapter 552, Government Code).

I certify that I will not perform any act that requires an appraiser license or certification until a license or certification has been issued to me by TALCB. If granted a license or certification, I will abide by the provisions of The Texas Appraiser Licensing and Certification Act (TEX OCC CODE Chapter 1103), TALCB Rules (22 TAC Chapters 153-157) and the Uniform Standards of Professional Appraisal Practice (USPAP).

\_\_\_\_\_  
Applicant's Typed or Printed Name

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date Signed

PRIVACY NOTICE

In accordance with Chapter 559, Government Code, the following notice about certain information laws and practices is given.

- (1) With few exceptions, an individual is entitled on request to be informed about the information that a state governmental body collects about the individual.
- (2) Under Sections 552.021 and 552.023 of the Governmental Code, the individual is entitled to receive and review the information.
- (3) Under Section 559.004 of the Governmental Code, the individual is entitled to have the governmental body correct information about the individual that is incorrect.