



STATE BOARD OF CERTIFIED REAL ESTATE APPRAISERS

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

Courier Address:
2601 North Third Street
Harrisburg PA 17110

Telephone: 717-783-4866
Fax: 717-705-5540
E-mail: st-appraise@pa.gov
Website: www.dos.pa.gov/real

APPRAISAL MANAGEMENT COMPANY CHANGE OF NAME AND/OR ADDRESS APPLICATION

CHECK THE APPROPRIATE BLOCK(S) AND COMPLETE THE REQUESTED INFORMATION

CHANGE OF NAME \$35.00

- Submit your approved documentation from the Pennsylvania Bureau of Corporations and Charitable Organizations
- Submit a current bond with new name;
- Foreign corporation submit - Amended Certificate of Authority
- Domestic corporation submit – Articles of Amendment
- Domestic Limited Liability Company submit – Amendment To A Certificate of Organization
- Foreign Limited Liability Company submit – Amendment To The Foreign Registration

CHANGE OF ADDRESS \$35.00

Complete the information below

REQUEST FOR A DUPLICATE LICENSE \$5.00

If you would like a **new** printed registration, submit a \$5.00 fee, check or money order, payable to the "Commonwealth of PA." **A processing fee of \$20.00 will be charged for any check or money order returned unpaid by your bank, regardless of the reason for non-payment.**

SECTION 1: APPLICANT INFORMATION

PLEASE PRINT OR TYPE

FORMER NAME:		
REGISTRATION NUMBER:		
NEW NAME:		
MAILING ADDRESS:	STREET _____	
	CITY _____	STATE _____ ZIP _____
ADDRESS: IF DIFFERENT THAN MAILING ADDRESS	STREET _____	
	CITY _____	STATE _____ ZIP _____
EMAIL ADDRESS:		
CONTACT NUMBERS:	TELEPHONE _____	FAX _____
HAVE THERE BEEN ANY CHANGES IN OWNERSHIP OR KEY PERSONS SINCE INITIAL REGISTRATION?	YES _____	NO _____
HAVE ALL CHANGES IN OWNERSHIP AND KEY PERSON BEEN PREVIOUSLY REPORTED TO THE BOARD?	YES _____	NO _____ IF NO, SUBMIT CHANGE OF OWNERSHIP OR CHANGE OF KEY PERSON APPLICATION

SECTION 2: SECONDARY INFORMATION

1. STATE OR PLACE OF INCORPORATION OR ORGANIZATION	
2. IF NOT AN INDIVIDUAL AND INCORPORATED OR OTHERWISE FORMED UNDER THE LAWS OF A JURISDICTION OTHER THAN THE COMMONWEALTH OF PENNSYLVANIA, ALSO SUBMIT DOCUMENTATION THAT STATES YOU ARE AUTHORIZED TO TRANSACT BUSINESS IN THIS COMMONWEALTH.	
3. FICTITIOUS NAME, IF ANY	
4. WEBSITE ADDRESS	
5. FAX NUMBER	
6. LIST EACH STATE OR JURISDICTIONS IN WHICH APPLICANT IS REGISTERED AS AN APPRAISAL MANAGEMENT COMPANY. ATTACH SEPARATE PAGE, IF NEEDED	
7. MONTH AND YEAR APPLICANT BEGAN OFFERING APPRAISAL MANAGEMENT SERVICES IN PENNSYLVANIA.	

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.

ADDITIONALLY, 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 _____