



New Hampshire Real Estate Appraiser Board

APPLICATION FOR RENEWAL OF REAL ESTATE APPRAISER APPRENTICE CLASSIFICATION

Instructions

Please Print or Type.

If additional space is required, attach additional sheets.

A check in the amount of \$150 (payable to the Treasurer, State of NH) must accompany this application.

Renewal applications must be received prior to your expiration date. Late applications will be subject to a \$50 late fee.

Incomplete applications will be returned unprocessed.

Include a copy of your experience log signed monthly by your supervisor. The log should cover the time since your last renewal, or, if this is your first renewal, since you received your apprentice credential.

Include one full, signed copy of an appraisal listed on your experience log.

1. Current New Hampshire credential number: NHAA- _____

2. Full Name _____
(First) (Middle Name) (Last)

3. Contact Information

	<u>Home</u>	<u>Principal Place of Business</u>
Address	_____	_____
City, State, Zip Code	_____	_____
Telephone Number	_____	_____
Fax Number:	_____	_____
E-Mail:	_____	_____

4. Preferred Mailing Address:* Home _____ Work _____ Other _____
 Other: _____

**Note: Your mailing address will become public information.*

For questions 5 – 7 circle Yes or No. For any questions answered “yes”, attach an additional page providing the details.

- | | | |
|------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 5. Have you ever had any disciplinary action taken against you by any appraiser board or licensing authority? | Yes | No |
| 6. Have you ever been convicted of a misdemeanor involving dishonesty, forgery, fraud, misrepresentation or similar offense? | Yes | No |
| 7. Have you ever been convicted of a felony? | Yes | No |

	<u>Supervising Appraiser No. 1</u>	<u>Supervising Appraiser No. 2</u>
Name (please print):	_____	_____
Cert Number:	_____	_____
Signature:	_____	_____

Signature of Applicant

Date

Credit Card Sheets are not accepted via e-mail.

You may pay your fee with a credit card by filling out this form. Please make sure that all information is correct and up to date. Indicate what the fee is for under transaction type.

This page will be destroyed after the transaction has taken place.

Transaction Type:		Amount Due:	
Card Type: (please select one) <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard (required)			
Card Number			(required)
Expiration Date:	Month:	Year:	(required)
Billing Name and Address (your billing address must match the address associated with the credit card you are using.)			
Name on Card:			
Billing Address:			
City:			
State/Province:			
Zip/Postal Code:			
Country:			
Authorization Signature :			