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## ADDITIONAL INSTRUCTIONS FOR APPLICATION

All applicants for initial registration, licensure or certification are required to complete a criminal records check of **both state and FBI records**. This requirement also applies to an applicant who is “upgrading” their credential.

- An applicant must have fingerprints taken by the Webcheck® user (a business, government agency or private entity that provides criminal record check services) approved by the Bureau of Criminal Identification and Investigation (BCI&I) within ten (10) days after the date of filing an application. Applicants should not have fingerprints taken before filing an application with the Division of Real Estate.
- An applicant must contact and arrange with a Webcheck® user to have fingerprints taken and submitted to BCI&I using the Webcheck® system. Applicants should take their government issued photo identification with them to the Webcheck® location. Some Webcheck® users can only submit fingerprints for a state records check and *not* an FBI records check. The applicant should confirm the Webcheck® user can submit **both state and FBI fingerprints** to BCI&I.

A list of Webcheck® users may be found on the web at:

<http://www.ohioattorneygeneral.gov/Business/Services-for-Business/WebCheck/Webcheck-Community-Listing>

Additional information on Webcheck® may be found at:

<http://www.ohioattorneygeneral.gov/Business/Services-for-Business/WebCheck> or obtained from BCI&I at (877) 224-0043 or P.O. Box 365 London, Ohio 43140

- The applicant must pay all fees associated with the criminal records check to the Webcheck® user at the time the fingerprints are taken.
- An applicant must instruct the Webcheck® user to use the following reason codes and to have BCI & I send the results (state and FBI criminal records check) to the Division at this address:

**BCI&I Reason Code: 4763 05 and/or 121 08**

**FBI Reason Code: 121 08**

### Division of Real Estate and Professional Licensing

77 S High St., 20<sup>th</sup> Fl.

Columbus, OH 43215-6133

- BCI&I submits results to the Division within thirty (30) days of BCI&I’s receipts of the applicant’s finger prints.
- Failure to timely comply with the criminal records check requirement may result in the denial of an application.
- **You may obtain a copy of your FBI Identification Record by sending a request to:**

**FBI’s CJIS Division**

**Attn: Record Request**

**1000 Custer Hollow Rd.**

**Clarksburg, WV 26306**

### **You are required to provide the following:**

1. Your written request.
2. Payment for the \$18 processing fee, either by certified check or money order made payable to the U.S. Treasury, or a credit card. For credit card payment information, refer to [www.fbi.gov/hq/cjisd/fprequest.htm](http://www.fbi.gov/hq/cjisd/fprequest.htm).
3. A current, original ten print fingerprint submission (not previously processed) taken by a local law enforcement agency and bearing your **name, date of birth, and place of birth.**

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**If, after reviewing your record, you believe it is inaccurate or incomplete, you may challenge the record by contacting the agency (or agencies) that originally submitted the information or by sending your challenge to:**

**FBI's CJIS Division  
Attn: Correspondence Group  
1000 Custer Hollow Rd  
Clarksburg, WV 26306**

**Individuals requesting a Challenge and Review of their Ohio criminal history record, should utilize the following procedure.**

1. A written request for a challenge & review must be submitted to the Ohio Bureau of Criminal Identification & Investigation, Identification Division. This request must include a brief explanation for the reason the record is being challenged, the individuals name and complete mailing address.
2. The individual must be fingerprinted by a law enforcement or criminal justice agency to provide positive identification. All data fields on the fingerprint card must be completely filled out. To ensure expeditious processing the reason fingerprinted data field should contain "Challenge & Review" (There is no fee charge for this service)
3. The required items listed above should be mailed together to:

**Ohio Bureau of Criminal Identification & Investigation  
Attn: Challenge & Review  
PO Box 365  
London, Ohio 43140**



Department of Commerce

Division of Real Estate & Professional Licensing

Please visit our website at www.com.ohio.gov/real

614 | 466-4100

FAX 614 | 644-0584

TTY/TDD: 800 | 750-0750

Anne M. Petit, Superintendent

# APPRAISER OUT-OF-STATE LICENSE/CERTIFICATE APPLICATION

A check, certified check or money order in the amount of \$265, consisting of a \$175 application fee, a \$50 recovery fund assessment and a \$40 Federal Registry fee, made payable to the Division of Real Estate & Professional Licensing, must accompany the application. This application fee is non-refundable.

FOR DIVISION USE ONLY
FILE NUMBER

Mail To: 77 S. High St., 20<sup>th</sup> Floor, Columbus, OH 43215-6133.

A letter of good standing from each state in which you currently hold an active appraiser credential must accompany this application. OAC 1301:11-1-08(A)(6), (B)(6), (C)(6): The Superintendent may waive the requirement of an examination only if the applicant provides to the Division a copy of his or her current appraiser license or certification. If you plan on supervising an appraiser assistant, please see the requirements found in OAC 1301:11-3-04.

### APPLICATION FOR (check one)

<input type="checkbox"/> GENERAL REAL ESTATE APPRAISER CERTIFICATE	<input type="checkbox"/> RESIDENTIAL REAL ESTATE APPRAISER CERTIFICATE	<input type="checkbox"/> RESIDENTIAL REAL ESTATE APPRAISER LICENSE
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### APPLICANT IDENTIFICATION AND EMPLOYMENT HISTORY

FIRST NAME	MIDDLE NAME	LAST NAME	SOCIAL SECURITY NUMBER	DATE OF BIRTH
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HOME ADDRESS

CITY	COUNTY	STATE	ZIP CODE	HOME PHONE NUMBER
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EMAIL ADDRESS

BUSINESS NAME	BUSINESS PHONE NUMBER
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BUSINESS ADDRESS	CITY	STATE	ZIP CODE
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### ETHICAL CONDUCT AND LEGAL HISTORY

Please attach a complete explanation for any questions answered yes below. Questions concerning professional licenses, certificates or registrations apply to all professional licenses, certifications or registrations regardless of profession.

<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you ever been disciplined in any manner by any public entity, including the Ohio Division of Real Estate, or professional or trade association for any violation of any professional licensing law, regulation or ethical rule?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you ever been refused or denied any professional license, certificate or registration by any public entity, including the Ohio Division of Real Estate?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you ever had any professional license, certificate or registration, including any license, certificate or registration issued by the Ohio Division of Real Estate, revoked, suspended or limited in any way for any reason?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you ever been notified by any public entity, including the Ohio Division of Real Estate, or professional or trade association that you were under investigation for any violation of any professional licensing law, regulation or ethical rule?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Are you presently the subject of any unsatisfied judgments?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you ever been convicted of, pled guilty to or been granted intervention in lieu of conviction for any unlawful conduct excluding minor traffic violations?
<input type="checkbox"/> YES	<input type="checkbox"/> NO	Have you ever been scheduled to sit for the Ohio Appraiser Examination? If yes, indicate month and year _____

### CURRENT LICENSES AND CERTIFICATES

In what state(s) are you currently a licensed or certified appraiser? Please attach a letter of good standing(s) from EACH state in which you are an active licensed or certified appraiser. (Attach additional sheet if necessary.)

STATE OF LICENSURE/CERTIFICATION	TYPE OF LICENSE/CERTIFICATE	LICENSE/CERTIFICATE NUMBER	EFFECTIVE DATE

### OHIO REAL ESTATE BROKER OR SALESPERSON LICENSE

HAVE YOU EVER BEEN LICENSED AS A REAL ESTATE BROKER OR SALESPERSON IN OHIO?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	If yes:	LICENSE TYPE	FILE NUMBER
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NOTICE: Per ORC149.43, this application and the information contained therein, except for the home address and social security number, is public record.

NOTICE: Evidence that payment has been refused by the drawer's bank upon a check drawn to the order of the Ohio Division of Real Estate & Professional Licensing shall constitute prima facie evidence of misconduct and shall constitute a violation of division (G)(4) of section 4763.11 of ORC.

Oath and Affidavit

I HEREBY:

1. Agree that I have knowledge of and comply with the standards set forth in Chapter 4763 of the Ohio Revised Code, and the rules promulgated thereto, and understand the types of misconduct for which disciplinary proceedings may be initiated against me pursuant to said chapter;
2. Authorize the Real Estate Appraiser Board and the Superintendent of the Ohio Division of Real Estate and Professional Licensing to inform any of the following entities of any disciplinary action taken by the Appraiser Board and the basis for that action: Ohio Real Estate Commission; Appraisal Sub-Committee of the Federal Financial Institutions Examination Council (FFIEC); any state in which I have the authority or any state in which I may apply for the authority to perform any appraisal activities involving federally related transactions pursuant to Title XI of FIRREA of 1989; and any other individual or entity permitted by law.
3. Agree to return the license/certificate upon request if issued to me in error, or if requested by the Ohio Real Estate Appraiser Board after a hearing pursuant to disciplinary action.

The foregoing statements and information, including any attachments, are provided for the purpose of procuring an Ohio real estate appraiser license/certificate. I hereby consent to the use of the information provided herein as evidence by the Ohio Real Estate Appraiser Board, or in any court in Ohio where a violation of Chapter 4763 of the Ohio Revised Code or the rules promulgated thereto is claimed.

AFFIDAVIT

I certify that all of the statements on this application and all of the attached materials are complete and accurate. I understand that any false statement on this form or the attached materials may subject me to criminal prosecution and the denial of my Ohio appraiser license/certificate application.

State of \_\_\_\_\_

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

County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_,

by \_\_\_\_\_.

NAME OF APPLICANT

\_\_\_\_\_  
SIGNATURE OF NOTARY

(NOTARY SEAL)

\_\_\_\_\_  
EXPIRATION DATE

**NOTICE:** Ohio Revised Code Section 4763.11(G)(1) requires disciplinary action against any licensee or certificate holder who makes a false statement or provides false information on any application to this Division. Further, Ohio Revised Code Section 2921.13 makes the providing of a false statement to a government official or public agency subject to criminal sanctions.

**Notice to Out-of-State Applicants - Consent to Service of Process**

All out-of-state applicants are required to complete the consent to service of process. Your license/certificate cannot be processed until the Division receives all necessary documentation.

\_\_\_\_\_  
APPLICANT NAME

\_\_\_\_\_  
DATE OF BIRTH

**Out-of-State Appraiser Applicant's  
Consent to Service of Process  
[R.C. 4763.05(E)(3)]**

I, \_\_\_\_\_, being a non-resident applicant for an Ohio real estate appraiser  
NAME OF APPLICANT (PLEASE PRINT)  
license/certificate, in accordance with Ohio Revised Code Section 4763.05(E)(3), do hereby irrevocably consent to the service of process upon me by means of delivery of that process to the Secretary of State if, in an action against me arising from my activities as a licensee or certificate holder, the plaintiff, in the exercise of due diligence, cannot effect personal service upon me.

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

\_\_\_\_\_  
DATE

State of \_\_\_\_\_

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

County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_,  
by \_\_\_\_\_.  
NAME OF APPLICANT

\_\_\_\_\_  
SIGNATURE OF NOTARY

(NOTARY SEAL)

\_\_\_\_\_  
EXPIRATION DATE