



BRECA USE ONLY

APPRAISAL MANAGEMENT COMPANY CERTIFICATE OF REGISTRATION APPLICATION
Read All Directions in Parts IV and V Prior to Completing this Application.

PART I: Applicant Information

A. Appraisal Management Company (AMC)

1. Name		
2. Mailing Address (Address of Record)		
Address		
City		State
		Zip Code
3. Business Telephone Number		4. Business Fax Number (optional)
5. Federal Employer Identification Number (FEIN)		

B. Designated Officer

(Note: The Designated Officer MUST be included on the AMC list of qualified Controlling Persons (see Parts II, IV and V below.)

1. Name		
Last	First	M.I.
2. Title		
3. Residence Telephone Number		4. Business Email Address (optional)
Home	Cell	

C. Type of Entity

1. Legal Structure. *Check the box that applies to the business entity type of the applicant.*

<input type="checkbox"/> Domestic Corporation	<input type="checkbox"/> Foreign Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietor
<input type="checkbox"/> Domestic LLC	<input type="checkbox"/> Foreign LLC	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Other *
If "Other" describe:			

2. Formation and Operation Documents. *Submit Articles of Incorporation, Articles of Organization, Statement of Partnership, or equivalent formation documents verifying the legal formation of the AMC (if any) and the Operating Agreements, Corporate by-laws, Partnership Agreement, or operation documents of the AMC (if any). Attach to this application.*

3. AMC Type: (Select One):

- Single state:** An AMC with a panel of more than 15 appraisers engaged or contracted to perform appraisals in connection with covered transactions during the 12 month period after the issue date of the initial registration.
- Multi-state:** An AMC with a panel of 25 or more appraisers in two or more states engaged or contracted to perform appraisals in connection with covered transactions during the 12 month period after the issue date of the initial registration.

4. Is the AMC federally regulated? Yes No

PART II: Controlling Person(s) Information

1. List each name of all “Controlling Persons” of the AMC Including the Designated Officer.

1.	2.
3.	4.
5.	6.
7.	8.
9.	10.

2. A separate “Appraisal Management Company (AMC) Controlling Person Application” (REA 5002) form must be included for each of the above listed Controlling Persons and submitted with this AMC application (REA 5001).

PART III: Registration Details

1. Has the AMC ever had a certificate of registration denied, suspended, restricted, revoked or disciplined in any way in this state or any other state?

Yes No

If yes, complete “Registration Details” section below.

In addition you must submit a certified copy of the administrative agency’s investigative report, and certified copies of the administrative agency’s docket, complaint, accusation or other order.

REGISTRATION DETAILS			
Type of License	License ID No.	License Expiration Date	State
Action (revoked, etc.)	Date of Action	Date Action Terminated	Code Section Violated
ADDITIONAL INFORMATION: ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED AND DATED.			

2. Has any owner of any percentage ever had a certificate of registration denied, suspended, restricted, revoked or disciplined in any way in this state or any other state other than by the California Bureau of Real Estate Appraisers? Yes No

If yes, complete “Registration Details” section below.

In addition you must submit a certified copy of the administrative agency’s investigative report, and certified copies of the administrative agency’s docket, complaint, accusation or other order.

REGISTRATION DETAILS			
Type of License	License ID No.	License Expiration Date	State
Action (revoked, etc.)	Date of Action	Date Action Terminated	Code Section Violated
ADDITIONAL INFORMATION: ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED AND DATED.			

REGISTRATION DETAILS			
Type of License	License ID No.	License Expiration Date	State
Action (revoked, etc.)	Date of Action	Date Action Terminated	Code Section Violated
ADDITIONAL INFORMATION: ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED AND DATED.			

PART IV: Application Declaration

I, _____ (name), certify under penalty of perjury in accordance with California law, that I am the Designated Officer and duly authorized as such and understand and agree, individually and on behalf of _____ (name of AMC), to abide by all federal and California laws applicable to appraisal management companies receiving and maintaining a Certificate of Registration under California law. In addition, I certify that _____ (name of AMC) is legally formed pursuant to the applicable state law and, further, that _____ (name of AMC) shall comply with all California laws as necessary in order to validly operate in California. I declare under penalty of perjury in accordance with California law that I am 18 years of age or older and that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any certificate of registration and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3 or 4 years pursuant to Penal Code section 126.

If the applicant is not a person or entity domiciled in this state, _____ (the name and contact number of a person or entity) is acting as agent of service of process in this state and irrevocably consents to service of process in favor of the Bureau.

Executed this _____ day of _____ at _____ (city or county) _____ (state).

Signature _____

Name (please print) _____

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California, County of _____,

On _____, before me, _____ (insert name and title of the officer), personally appeared, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal.

Signature
(Seal)

MUST BE SIGNED AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA

PART V: General Instructions

PART IV. READ THE FOLLOWING GENERAL INSTRUCTION INFORMATION PRIOR TO COMPLETING THIS FORM

A. GENERAL INFORMATION

- Complete all sections of Parts I, II and III above.
- Do not write in the shaded areas.
- Type or print clearly in blue or black ink.
- The Designated Officer must sign Part III after AMC completion of Parts I and II. Applications must be submitted with original signatures. Applications with electronic or faxed signatures will not be accepted.
- Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
- All application fees must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or credit card (see REA 2030 to pay by credit card).
- All application fees are non-refundable.
- Once BREa approves an AMC applicant and each associated Controlling Person Application, an Issuance Fee will be due to BREa prior to issuance of the final Certificate of Registration.
- Appraisal management companies MUST notify the BREa within 10 business days of any change to contact information for the Designated Officer or any Controlling Person by submitting an Appraisal Management Company Change Notification and Miscellaneous Requests Form REA 5011.
- Mail completed application, necessary fees and qualifying documentation to:
BUREAU OF REAL ESTATE APPRAISERS
3075 Prospect Park Drive, Suite 190
Rancho Cordova, CA 95670
If you have any questions, please write to the address listed above or call (916) 552-9000

PART VI: Form Instructions

A. INSTRUCTIONS PART I: Applicant Information

INSTRUCTIONS PART I. A.: AMC

1. NAME OF AMC – List the name of the AMC for which you are submitting this application for certificate of registration.
2. BUSINESS STREET ADDRESS – List the business address of the AMC for which you are submitting this application for certificate of registration. **Note: the required information is public record.**
3. BUSINESS TELEPHONE NUMBER – List the business telephone number of the AMC for which you are submitting this application for certificate of registration. **Note: the required information is public record.**
4. BUSINESS FAX NUMBER – List the business fax number of the AMC for which you are submitting this application for certificate of registration.
5. FEDERAL EMPLOYER IDENTIFICATION NUMBER – List the federal employer identification number (FEIN).

INSTRUCTIONS PART I. B.: Designated Officer

1. NAME OF DESIGNATED OFFICER – List the name of the company's Designated Officer. The Designated Officer must also be a listed Controlling Person and submit an *Appraisal Management Company (AMC) Controlling Person Application* form REA 5002 with this application
2. TITLE OF DESIGNATED OFFICER – List the official title of the company's Designated Officer (i.e. President, Director, etc.) held within the company.
3. RESIDENCE PHONE NUMBER OF DESIGNATED OFFICER – List the residence phone number for the Designated Officer.
4. BUSINESS EMAIL ADDRESS OF DESIGNATED OFFICER – List the business email address for the Designated Officer of the company.

INSTRUCTIONS PART I. C.: Type of Entity

1. LEGAL STRUCTURE – Check the box that describes the business entity type of the AMC. If the type is not listed, please provide a description.
2. FORMATION AND OPERATION DOCUMENTS – Provide copies of the documents authorizing the valid formation of Applicant under the laws of the state in which it is organized.
3. AMC TYPE - Select whether the AMC is a single state AMC with a panel of more than 15 appraisers or a multi-state AMC with a panel of 25 or more appraisers in two or more states. "Covered transactions" means any consumer credit transaction secured by the consumer's principal dwelling. 12 C.F.R §34.211(h).
4. FEDERALLY REGULATED - Select either yes or no to indicate whether or not the AMC is federally regulated.

B. INSTRUCTIONS PART II: Controlling Person(s) Information

1. NAMES OF CONTROLLING PERSON(S) – List the full names of each "Controlling Person" of the AMC for which you are submitting this application for certificate of registration including the Designated Officer. Please refer to Part IV Section C for a definition of "Controlling Person".
2. CONTROLLING PERSON APPLICATION (REA 5002) – Attach a completed *Appraisal Management Company (AMC) Controlling Person Application* form REA 5002 for each individual listed as a Controlling Person, including the Designated Officer.

C. INSTRUCTIONS PART III: Registration Details

1. REGISTRATION DETAILS – Include any information regarding if the AMC and any owner of any percentage of the AMC have previously had a certificate of registration denied, suspended, restricted, revoked or disciplined in any way in this state or any other state other than by this bureau.
If yes, complete "Registration Details" section.

D. INSTRUCTIONS PART IV: *Application Declaration*

1. APPLICATION DECLARATION – The Designated Officer of the AMC shall read, sign and date the Application Declaration. If executed outside of the State of California, this declaration must be signed before and certified by a

notary public. This form must be signed by the named “Designated Officer” listed in Part I section B of the application.

Privacy Information - Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law. General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Sections 30 and 31 requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers the licensee's social security number or individual taxpayer identification number which will be furnished to the Franchise Tax Board, the Employment Development Department (EDD) and California Department of Tax and Fee Administration (CDTFA). Your social security number or individual taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board and the CDTFA will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The EDD will use your number to determine compliance with any possible family support obligations. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (included, but not limited to, Department of Financial Protection and Innovation, Department of Insurance, Department of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, and CDTFA). Under Business and Professions Code sections 31 and 494.5, CDTFA and the Franchise Tax Board may share taxpayer information with the Bureau. You are required to pay your state tax obligation. This application may be denied or your certificate of registration may be suspended if you have a state tax obligation and the state tax obligation is not paid.

Bureau of Real Estate Appraisers
Custodian of Records
3075 Prospect Park Drive, Ste. 190
Rancho Cordova, CA 95670
Telephone: (916) 552-9000