



State of Rhode Island and Providence Plantations
DEPARTMENT OF BUSINESS REGULATION
1511 Pontiac Avenue, Bldg. 69-1
Cranston, Rhode Island 02920

Division of Commercial Licensing
Real Estate Appraisers Section

AMC Registration Requirements

The following documents must accompany a completed application at the time of submission. All incomplete submissions will be returned. All registrations are valid for one (1) year from the date of issuance.

- Proof of registration with the Rhode Island Secretary of State.
- **An Attestation for all Owners/Officers/Employee-in-Charge/Managing Principals** must be completed by each individual or corporation, partnership or other business entity, who, directly or indirectly own more than ten percent (10%) of an applicant AMC, and any officer, employee in charge, or managing principal of an applicant AMC.
- Taxpayer Status Affidavit.
- A list of **ONLY** the Independent Fee Appraisers on the AMC's panel whom have performed an appraisal(s) in Rhode Island.
- A Criminal History Record (CHR) from the Rhode Island Department of the Attorney General for each person, who directly or indirectly owns more than 10%, or any officer, controlling person, employee in charge, or managing principal of an applicant. Non-residents must also submit a Criminal History Record (CHR) from their home state law enforcement agency.
- If applicable, a copy of the Trade Name Certificate.
- If applicable, a list of all other states the AMC is registered.

Fees:

All checks or money orders are to be made payable to the **RI General Treasurer**.

- Initial Registration Fee - \$500.
- AMC Federal Registration Fee - \$25 x _____ (No. of appraisers who performed an appraisal for the AMC in the past 12 months).



**State of Rhode Island and Providence Plantations
DEPARTMENT OF BUSINESS REGULATION
1511 Pontiac Avenue, Bldg. 69-1
Cranston, Rhode Island 02920**

**Division of Commercial Licensing
Real Estate Appraisers Section**

CRIMINAL HISTORY RECORD SUBMISSION REQUIREMENTS

AMC REGISTRATION APPLICANTS

A Criminal History Record (“CHR”) must be submitted to the Real Estate Appraisers Section of the Department of Business Regulation (“DBR”), Division of Commercial Licensing with each AMC Registration Application for each person, who directly or indirectly owns more than 10%, or any officer, controlling person, employee in charge, or managing principal of an applicant.

INSTRUCTIONS FOR OBTAINING A CHR

Applying in Person: A Criminal History Record may be obtained by visiting the Bureau of Criminal Identification at the Rhode Island Department of the Attorney General (“DAG”). To apply for a CHR in this manner, bring a picture-identification, showing your date of birth.

Applying by Mail: To apply by mail, send a notarized copy of a photo ID, showing your date of birth, and a signed/notarized letter, giving permission to the DAG to conduct a background investigation, along with a self-addressed stamped envelope.

**Mail to: Department of the Attorney General
4 Howard Avenue
Cranston, Rhode Island, 02920**

Hours of operation are 8:30 am to 4:30 pm.

The cost for a CHR, whether applying in person or by mail, is five dollars (\$5.00), and is payable by check or money order to the “BCI”. Please allow time for the DAG to process and generate your request. For further questions about this process, you may contact the DAG at (401) 274-4400.

***Non-resident applicants must also submit a Criminal History Record (CHR) from their home state law enforcement agency and as well as one from the DAG in Rhode Island.**

Controlling Person

Name of AMC Controlling Person

Street Address City State Zip Code

Telephone Number Email Address

1. Has the AMC Controlling Person ever had their appraisal license or certification denied, suspended or revoked, in this state or any other state? Yes No **If yes, attach a statement of explanation.**

2. Has the AMC Controlling Person ever had or currently have any disciplinary actions taken against them in any jurisdiction? Yes No **If yes, attach a statement of explanation.**

3. Has the AMC Controlling Person ever been convicted of or plead nolo contendere to any criminal offense (other than minor traffic offences), in any jurisdiction? Yes No **If yes, attach an explanation and/or disposition.**

4. You must submit a copy of your Criminal History Record (CHR) from the Rhode Island Department of the Attorney General. If you are not a resident of Rhode Island, you must also submit a Criminal History Record from your home state law enforcement agency.

Non-Resident Entities

Name of Agent for Service of Process

Mailing Address City State Zip Code

Telephone Number Email Address

CONSENT TO SERVICE OF PROCESS

Pursuant to R.I. Gen. Laws § 5-20.9-5, The undersigned _____, (name of AMC) an entity organized under the law of _____, having applied to be registered as an AMC in Rhode Island, hereby irrevocably consent that service of process in any action arising out of the registrant's activities as an appraisal management company in Rhode Island may be made by delivery of the process on the Director.

Name of Controlling Person *Signature of Controlling Person* *Date*

Controlling Person ONLY

I swear, under penalty of perjury that the information provided in connection with this application is true to the best of my knowledge, with the understanding that any omissions, inaccuracies or failure to make full disclosures may be deemed sufficient reason to deny licensure by the Rhode Island Department of Business Regulation.

Name of Controlling Person *Signature of Controlling Person* *Date*

OFFICAL USE ONLY

Registration Number Effective Date Expiration Date



Tax Payer Status Affidavit / Identity Verification

All persons applying or renewing any license, registration, permit or other authority (hereinafter called "licensee") to conduct a business or occupation in the state of Rhode Island are required to file all applicable tax returns and pay all taxes owed to the state prior to receiving a license as mandated by state law (RIGL 5-76) except as noted below.

In order to verify that the state is not owed taxes, licensees are required to provide their Social Security Number and Federal Tax Identification Number as appropriate. These numbers will be transmitted to the Division of Taxation to verify tax status prior to the issuance of a license. This declaration must be made prior to the issuance of a license.

Licensee Declaration

- I hereby declare, under penalty of perjury, that I have filed all required state tax returns and have paid all taxes owed.
- I have entered a written installment agreement to pay delinquent taxes that is satisfactory to the Tax Administrator.
- I am currently pursuing administrative review of taxes owed to the state.
- I am in federal bankruptcy. (Case # _____)
- I am in state receivership. (Case # _____)
- I have been discharged from Bankruptcy. (Case # _____)

Full Name of AMC (Please Print or Type)

AMC's Federal Employer Identification Number (FEIN)

Print Full Name of AMC Controlling Person

Signature of AMC Controlling Person

Date