



**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**

RECIPROCAL LICENSING INSTRUCTIONS

The Department may, upon application, issue a license or certificate to an applicant who has otherwise met the requirements for licensure and/or certification in the State of Rhode Island without examination, provided the following terms and conditions are met:

1. The applicant holds a valid credential from a state which is in compliance with 12 U.S.C. 3351.
2. The credentialing requirements of that state as they exist at the time of application for reciprocal license must meet or exceed those which currently exist in the State of Rhode Island.
3. The applicant has complied with the provisions of R.I. Gen. Laws § 5-20.7-16.

Please submit the following documents and fees to the address listed above. All incomplete submissions will be returned.

- A completed Real Estate Appraiser Reciprocal Application;
- A completed Consent to Service of Process Form;
- A Criminal History Record (CHR) from the Rhode Island Attorney General's Office, and a CHR/CORI from applicant's home state.
- A Check or Money Order made payable to the RI General Treasurer, in the amount of \$680.00 for the application fee and two-year licensing fee.



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CRIMINAL HISTORY RECORD SUBMISSION REQUIREMENTS

FOR REAL ESTATE APPRAISER 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 Real Estate Appraiser Application. Processing applications is contingent upon the complete disposition, or results of any charges delineated or resolved prior to application submission. See instructions below to learn how to obtain your CHR.

INSTRUCTIONS

Applying in Person: A Criminal History Record may be obtained by visiting the Bureau of Criminal Identification at the Rhode Island Department of 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 a.m. to 4:30 p.m

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.

If you reside in another state, supply a CHR from your home state, as well as one from Rhode Island.



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REAL ESTATE APPRAISER RECIPROCAL APPLICATION

Please provide an email address that will be used for *all communication*, i.e. copy of license and renewal notifications:

Select one: **Licensed Residential** **Certified Residential** **Certified General**

First Name		Middle Initial	Last Name		
Residence Street Address			Residence City	State	Zip Code
Telephone Number			Social Security Number		Date of Birth
Business Address					
Business Name				Business Telephone Number	
Business Street Address			City	State	Zip Code
Original State of Licensure		License/Certification Number		License Type	
Statement of Truth					
Have you ever had an appraisal license or certification denied, suspended or revoked in any state? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide an explanation on an additional sheet.					
Are there any disciplinary actions, administrative actions or lawsuits pending against you in connection with any appraisal license that you now hold or have held? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide an explanation on an additional sheet.					
Have you ever been convicted of a criminal offense (other than minor traffic offenses) in any state? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide a complete copy of the courts disposition.					
I, the undersigned, 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 as an appraiser by the Rhode Island Department of Business Regulation.					
Signature _____				Date _____	
OFFICIAL USE ONLY					
Credential 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 (Please Print or Type)

Social Security Number (or FEIN for Business)

Signature

Date



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CONSENT TO SERVICE OF PROCESS

I, _____, having applied to be licensed/certified as a non-resident real estate appraiser in the State of Rhode Island, do hereby irrevocably appoint the RI Secretary of State, as my agent, upon whom all lawful process in any action or proceeding against me may be served in like manner and with the same legal force and effect as if I had been lawfully served with said process. As such, I do hereby authorize said agent to receive and accept service of process, pursuant to R.I. Gen Laws § 5-20.7-16(a) and Regulation 230-RICR-30-20-1 – Real Estate Appraisers.

Signature: _____ Date: _____

Subscribed and sworn to before the undersigned authority in the State of _____, in the County of _____, on this _____, day of _____, 20_____.

Notary Public

My Commission Expires: _____.