

MARYLAND COMMISSION OF REAL ESTATE APPRAISERS, APPRAISAL MANAGEMENT COMPANIES AND HOME INSPECTORS
500 N. CALVERT STREET, ROOM 302
BALTIMORE, MD 21202
 Telephone (410) 230-6165 Fax (410) 333-6314

APPRAISAL MANAGEMENT COMPANY CONTROLLING PERSON APPLICATION

Please read all directions prior to completing this form. No fee is required with this application.

Part I: Controlling Person Information (If more than one person, please complete a form for each person)

Name of Appraisal Management Company Controlling Person			
Street Address	City	State	Zip Code
Controlling Person's Title or Position			
Telephone Number	Email Address	Appraisal Registration Number/State (if applicable)	

Part II: Character Questions

1. Do you currently hold or have you ever held a Maryland real estate appraiser license? Yes No If yes, please list your registration number. Maryland real estate appraiser registration number: _____
2. Do you currently hold or have you ever had a real estate appraiser license in another State? Yes No If yes, please list your license number and the state in which you hold or held a license. Real estate appraiser number: _____ State: _____
3. Have you ever used or been known by any name other than, or in addition to, the name listed on this application? Yes No If yes, list all such names: _____
4. Have you ever been convicted in Maryland or anywhere else of a criminal offense other than a minor traffic offense or an offense that resulted in probation before judgment? Yes No If yes, please indicate all such offenses including the date and location of each offense; and attach a true test or certified copy of the court docket of the case. If you believe the charge has been erased or expunged, you must check with the appropriate court before completing this application.
5. Are you or have you ever been placed on probation, parole or supervision ordered by a court that restricted or limited your contact or dealings with any financial or real estate-related activity or business or otherwise restricted your acting in a fiduciary capacity? Yes No If yes, please indicate all such offenses including the date and location of each offense; and attach a true test or certified copy of the court docket of the case. If you believe the charge has been erased or expunged, you must check with the appropriate court before completing this application.
6. Have you ever had a license or certificate to act as an appraiser or to engage in activities related to the transfer of real property denied, suspended, restricted or revoked in this state or any other state or territory? Yes No If yes, attach a copy of the final agency action.
7. Have you ever been disciplined or have you received any order or judgment by a court or governmental agency, which order or judgment temporarily or permanently restrained you from engaging in specific business conduct or licensed activity? Yes No If yes, attach a true test or certified copy of any court records of the case.

Part III: Applicant of Declaration

I, _____ (name), certify under penalty of perjury in accordance with Maryland law, that I am a Controlling Person (as defined herein) and duly authorized as such and understand and agree, individually and on behalf of _____ (name of AMC), to abide by all federal and Maryland laws applicable to appraisal management companies receiving and maintaining a Registration under Maryland law. I declare under penalty of perjury in accordance with Maryland 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 without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any registration and may subject me to disciplinary action. I understand that any registration issued in conjunction with this application entitles the applicant to act only for the appraisal management company so registered and not in an individual capacity.

Applicant Signature: _____ Date: _____