



Use this form to request that your current license be placed in inactive status or request an extension of the inactive license status. You can also use this form to reinstate your license. This is not the same as being placed on military inactive status.

For more information about inactivating a license for military reasons, go to dol.wa.gov/military-personnel-and-veterans.

Mail this completed form, all required attachments, and a check or money order for the renewal fee (payable to Washington State Department of Licensing) to:



**Real Estate Appraiser
Department of Licensing
PO Box 3917
Seattle, WA 98124-3917**

For questions call, 360-664-6504 or email reappraisers@dol.wa.gov.

For ADA assistance, visit dol.wa.gov/accessibility, or call 360-902-3900 or 711 for relay service.

Determine your fees

1. Select your application type:

Inactivate license during an active license period—**no fee**

Reinstate license at time of renewal—**\$1,200** + 15-hour USPAP + 28 hours continuing education

2. Calculate your printing fees:

You must keep a copy of your license with you.

You can print your license from your online account for free. If you want us to print and mail your license, add \$5 for each copy to your payment.

I will print a copy of my license.

I want DOL to print a copy of my license for \$5 each and mail it to me.

Number of copies: _____ x \$5 = Total \$ _____

3. Provide your payment total:

\$ _____ Application type fee

+ \$ _____ Printing costs

= \$ _____ Total

Applicant contact information

TYPE or PRINT Applicant name (First, Middle, Last)	License number
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Answer the following

Do you understand that once we have inactivated your license that you cannot practice as a real estate appraiser until your license has been reinstated to active status?

Yes

No

Applicant information (continued)

New contact information

If your phone number, email, or address has changed, please provide your updated information.

New 10-digit phone number	New email
New mailing address (Street or PO Box, City, State, ZIP code)	

Legal background

Answer the following
 Answer the questions below. If you answer "Yes," attach a detailed explanation.

1. Within the last five years, in this state or any other jurisdiction, has there been any action (fine, suspension, revocation, censure, surrender, etc.) against any professional or occupational license, certification, or permit held by you?	Yes	No
2. Within the last five years, in this state or any other jurisdiction, have you defaulted, or been convicted of, or entered a plea of no contest to a gross misdemeanor or felony crime? (Don't include traffic convictions.)	Yes	No

Certification

I declare under penalty of perjury under the law of Washington that the foregoing is true and correct.

_____	X	_____
TYPE or PRINT name	Signature	
_____	_____	_____
Date (mm / dd / yyyy) signed	Place (city or county) signed	

Providing false information in this application may be cause for denial, suspension, or revocation of your professional license in the state of Washington.