



Appraisal Management Company Application

Apply for an Appraisal Management Company (AMC) license.

Online: <https://professions.dol.wa.gov>

Or mail this completed form, a check or money order for the **\$1,200 non-refundable fee** (payable to Department of Licensing) and all required attachments to:

**Appraisal Management Company Program
Department of Licensing
PO Box 3917
Seattle, WA 98124-3917**



For questions or language help call: (360) 664-6504 or email dolbpdamc@dol.wa.gov

Licenses are available for self-printing with an online account. If you want us to print and mail your license add a \$5 print fee for each copy to your payment.

- \$0 self-print license online.
- \$5 each. DOL print and mail license. Quantity _____ Total \$ _____

Include with your application:

- Non-refundable application fee—\$1,200
- AMC National Registry fee, if eligible to be on registry
- AMC \$100,000 surety bond form
- AMC Designated Controlling Person Registration form
- AMC Owner Registration form
- AMC Appraisal Subcommittee National Registry of AMCs Eligibility Registration form (whether eligible or not)

Company information

UBI/UBI Business ID/UBI Location ID (16 digits)	
TYPE OR PRINT Company name	
Name company will do business as (if applicable)	
Type of business (check one) <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Foreign corporation <input type="checkbox"/> Limited liability company	
Mailing address, City, State, ZIP code	
10-digit phone number and extension	Email
Physical address (Street address, City, State, ZIP code – if different than mailing address)	
Company website	Name of designated controlling person
Answer the following 1. Do you have a system in place to verify that a person added to your appraiser panel for work done in Washington holds a license or certificate in good standing? <input type="checkbox"/> Yes <input type="checkbox"/> No 2. Do you have a system in place to review the work of your appraisers? <input type="checkbox"/> Yes <input type="checkbox"/> No 3. Do you have a policy in place to periodically review the work of your appraisers? <input type="checkbox"/> Yes <input type="checkbox"/> No 4. Do you maintain detailed records of each service request you receive? <input type="checkbox"/> Yes <input type="checkbox"/> No 5. Do you maintain detailed records of each appraiser that performs real estate appraisal services? <input type="checkbox"/> Yes <input type="checkbox"/> No 6. Do you understand that you are required to maintain copies of the completed appraisal reports for a minimum of five years, or at least two years after final disposition of any judicial proceeding related to the assignment? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Legal background

Answer the following

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

- 1. Within the last 5 years, in this state or any other jurisdiction, has the business entity, any business owners, or any persons with controlling interest in this business had any action (fine, suspension, revocation, censure, surrender, etc.) taken against any professional or occupational license, certification, or permit? Yes No
- 2. Within the last 5 years, in this state or any other jurisdiction, has the business entity, any business owners, or any persons with controlling interest in this business 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

Declaration

Answer the following

- 1. I have read and I agree to follow all the applicable laws and rules of this profession and I understand the penalties for misconduct. Yes No
- 2. I understand that lawsuits or other actions may be filed against me and the appraisal management company in Washington and I consent that service of process may be made by delivering it to the Director of the Department of Licensing Yes No
- 3. I understand that the Department of Licensing has the right to inspect the records of the appraisal management company that are required to be kept by the laws and regulations of the appraisal management license. Yes No
- 4. I understand it is my responsibility as an owner to cooperate with any investigation by providing the Department of Licensing with the requested documents and a written explanation of the subject matter of a complaint.. . . . Yes No

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

TYPE or PRINT Name of designated controlling person

X

Signature of designated controlling person

Date and place

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