Commonwealth of Virginia Department of Professional and Occupational Regulation 9960 Mayland Drive, Suite 400 Richmond, Virginia 23233-1485 (804) 367-2039 www.dpor.virginia.gov



Real Estate Appraiser Board RESPONSIBLE PERSON CHANGE APPLICATION No Fee Required

1.	Appraisal Management Company Virginia License No.:													
2.	Appraisal Management Company Name													
3.	Email Address													
4.	Contact	Numb	er –											
					Primary Telepho	ne								
5.	Apprais	al Man	agement	Comp	any's Respo	nsible P	erson:							
	Α.	Name	lame of <u>current</u> Responsible Person											
	-	Last		_		First			Middle	Generation				
	В.	Name of <u>new</u> Responsible Person												
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	C	Last	Dooponoi	ible D	araan'a Addra	First			Middle	Generation				
	C.	New Responsible Person's Address												
						Cit	v		Sta	ate Zip Code				
	D.	<u>New</u> Responsible Person's Identification Number: (Provide <u>one</u> of the following)												
	\square Individual's Social Security Number * or													
	Virginia Department of Motor Vehicles Control Number Social Security or Virginia DMV Number (123													
	* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued													
	by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.													
	E. <u>New</u> Responsible Person's Date of Birth													
	F. <u>New</u> Responsible Person's VA Real Estate Appraiser License No.													
6.	Does the <u>new</u> Responsible Person hold a <u>current</u> or <u>expired</u> appraiser license, certification or registration issued by													
0.			-		or territory of t		•	<u>appiais</u>						
	No 🗌													
	Yes D If yes, complete the following table:													
			[State/Jurisdiction			License, Certification or Registration Number			Expiration Date				
			-											
			-											
			-											
			-											
	DAT	ΓE	FEE		TRANS CODE	EN.	TITY #		FILE #/LICENSE #	ISSUE DATE				
OFFICE USE ONLY			NO FE	E	5010			40						

- 7. Has the <u>new</u> Responsible Person ever been subject to a *disciplinary action* or any other corrective action taken by <u>any</u> (including Virginia) local, state or national regulatory body? This includes, but is not limited to, reprimand, revocation, suspension or denial of license, imposition of a monetary penalty, and required to complete remedial education.
 - No 🗌
 - Yes If yes, provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.
- 8. I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed any information that might affect the Board's decision to approve this application. I certify that I will notify the Department if the firm, the controlling person(s), the responsible person and any person who owns 10 percent or more of the firm is subject to any disciplinary action or convicted of a felony or misdemeanor (in any jurisdiction) prior to receiving the requested license. I certify that I have read, understood and complied with all the laws of Virginia under the provisions of Title 54.1, Chapter 20.2 of the *Code of Virginia*, and the *Appraisal Management Company Regulations*.

Signature of Owner or Controlling Person of the firm:

Print Name	 Title		
Signature		Date	