

**REAL ESTATE APPRAISER
EXAMINATION APPLICATION / RE-APPLICATION**

NYS Department of State
Division of Licensing Services
Examination Unit
PO Box 22001
Albany, NY 12201-2001
Phone: 518-473-2731

- INSTRUCTIONS:
- 1) Please carefully read and complete all sections. Applications that are illegible, incomplete or not accompanied by the **\$25** fee will be returned.
 - 2) Please print clearly or type all information.
 - 3) Completed applications should be sent to the address listed at the top of this form.

SECTION A APPLICANT INFORMATION		
Last Name (Please Print)	First Name	Middle Initial
Home Address		Phone Number ()
City, State, Zip		
E-Mail Address (If Any)		
SECTION B UNIQUE ID NUMBER (UID)		
Unique ID Number (UID) _____		
SECTION C ACKNOWLEDGMENT & SIGNATURE		
<p>Read this section carefully before signing below. I understand and acknowledge that:</p> <ul style="list-style-type: none"> ◆ upon approval of this completed application and fee, an admission notice will be mailed to me. The admission notice will include all of the necessary information to register and schedule my exam with an approved test provider. ◆ being eligible to take an exam does not mean that I have met all of the requirements for issuance of a license or certification. ◆ if I fail the exam for which I am applying, I will have to submit a new examination application and fee before I can re-take an exam. 		
Signature of Applicant (<i>Read statement above before signing</i>)		Date
SECTION D PAYMENT		
<p>Examination Application Fee: \$25. Payment may be made by check or money order payable to the Department of State or by credit card (Visa or MasterCard) by using the credit card authorization form which is available on the back of this application or for download. Do not send cash. Application fees are nonrefundable. A \$20 fee will be charged for any check returned by your bank.</p>		
<p>For Office Use Only: Original ___ Re-Apply ___ Admission Notice Mailed: ___ / ___ / ___ By: _____</p>		