#### SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION

### APPRAISER CERTIFICATION PROGRAM

# APPRAISAL MANAGEMENT COMPANY **2023 RENEWAL APPLICATION**

INSTRI	UCTIONS: (Please type or print)	DO NOT WRITE IN THIS SPACE		
1. 2.	Complete the information requested. Submit original Registration Surety Bond \$25,000 form or Irrevocable Letter of Credit along with the Power of Attorney. Include payment of \$750.00 (renewal) plus National Registry Fee (per calculation on last page). Check or credit/debit cardsaccepted. Renewals received 01/01/2023 and after are subject to a \$50.00 per month late fee.	Date application received Secretary of State Surety Bond Through 12/31/2023		
3.		Date application approved  Date issued		
		Authorization Signature		
	Send to the address on page four of this form.  : All fees are non-refundable.			

#### **NOTICE**

- A company applying for a South Dakota AMC registration that does not oversee a network or panel of more than fifteen certified or licensed appraisers in a state, or twenty-five or more nationally, within a given year is not required to register.
- A company applying for registration that is a subsidiary owned and controlled by a financial institution regulated by a federall financial institution regulatory authority, must complete a form provided by the Appraiser Certification Program. Contact the Appraiser Certification Program at 605-773-3803, or email Anna McCarthy at anna.mccarthy@state.sd.us.

Type or print clearly in ink. All questions on this renewal application must be answered fully and completely as required.

SECTION A: APPRAISAL MANAGEMENT COMPANY INFORMATION (Any change must be reported within five days.)				
Legal Name:	AMC Certificate Number:			
Advertising Name (if different from legal name): _				
All other Trade, Business or Affiliated Names:				
Contact Person for Renewal:				
Email Address:	Phone:			
Mailing Address:				
Has the business mailing address changed?	No Yes (if yes, complete below)			
Business Mailing Address:				
Business Phone: Busine	ss Fax: Website:			
Is your company's Certificate of Authority with the SD Se	ecretary of State's Office in good standing?			
Has any disciplinary action been taken against your com No Yes (If yes	pany in South Dakota or any other state or jurisdiction? s, explain thoroughly in Section F.)			
Are there any investigations, complaints, or disciplinary other state or jurisdiction? No Yes (If yes	,			

Has the Designated Officer of	contact information changed?	No	Yes (If yes, cor	mplete below)
Last Name	First Name	Middle	Suffix	
Address	City		State	Zip
Business Phone:	Business Fax:		Website:	
Physical Address (if different fr	om the mailing address in Section B	)		
Address	City		State	Zip
SECTION C: CONTACT INFO	DRMATION			
and contact information in S	·	oi appiaisais:	No Ye	s (if yes, submit names
the answers supplied herein	, the under ction A, state and affirm that I ha I, including all supporting docum er, I certify individually and on b	ave read the weents attached	vithin and forego , are true and co	•
	ntity is legally formed pursuant ary to validly operate within the			ll comply with all South
companies, the laws	ntity will comply with federal an and the administrative rules pro onduct under any certificate of r	omulgated by	the Appraiser Ce	rtification Program
for a credential to a	ng, in whole or in part, directly on the state appraiser in articled, revoked or ed, denied, canceled, revoked or ed or reinstated;	ny appraiser-cr	edentialing juriso	diction, which
individual who has h credentialing jurisdi	wns more than 10% of the applicated or applied for a credential to ction, which credential was refuse not subsequently granted or re	o act as a real of sed, denied, ca	estate appraiser	in any appraiser-
5. that no person own	ng the entity, in whole or in part	t, directly or in	idirectly, a design	nated officer or a

dishonest dealings;

controlling person has pled guilty or nolo contendere to or being found guilty of a felony; pled guilty or nolo contendere to or being convicted of a misdemeanor involving mortgage lending or real estate appraising; or having committed an offense involving breach of trust, moral turpitude, fraudulent or

- 6. that Entity has a system in place to verify that utilized appraisers are licensed or certified and in good standing by this state;
- 7. that Entity requires each utilized appraiser who performs appraisals in this state to certify in writing the area of geographic competency and specific appraisal assignments competent to appraise;
- 8. that Entity has a system in place to review the work of utilized appraisers who perform appraisal services to validate that the services were conducted in conformity with the Uniform Standards of Professional Appraisal Practice;
- 9. that Entity has a system in place to verify that any employee of, or independent contractor to, the appraisal management company that is utilized to perform an appraisal review, of the work of utilized appraisers who perform an appraisal assignment for a property located in South Dakota, be licensed or certified and in good standing by this state;
- 10. that Entity files a referral with the Program if there is evidence that a utilized appraiser is in violation of the laws, rules or Uniform Standards of Professional Appraisal Practice regarding appraisers;
- 11. that Entity maintains with the Program the name and address of a registered agent for service of process; and notify the Program, within five days of any change to the information on file;
- 12. that Entity will disclose to its client(s) the actual fees paid to an appraiser for appraisal services, separate from any other fees or charges for appraisal management services, and make the information available to the Program upon request;
- 13. that Entity will disclose its certificate of registration number within its engagement document with each utilized appraiser;
- 14. that Entity will retain records pursuant to ARSD 20:77:06:01;
- 15. that I understand and agree that the Program may request additional information or documentation deemed necessary for the verification of the information disclosed in this application;
- 16. that my failure to make a full and accurate disclosure of any information called for herein may result in the denial of a certificate of registration. Further, any certificate of registration obtained on the basis of this application may be revoked or suspended for my failure to disclose full and accurate information herein;
- 17. that I affirm that I have read and agree to comply with all provisions of the South Dakota Appraisal Management Company laws and rules; and
- 18. that I hereby authorize any state or Federal agency to release to the Program any and all information concerning complaints or charges brought before it, whether or not the matter resulted in action against the Entity. This authorization specifically includes information that may otherwise be deemed privileged or confidential. I hereby also waive any procedural due process protections that may otherwise entitle the Entity to a hearing before the release of this information.

l,	, the Designated Officer of	(name
of appraisal management company), he are true and correct.	reby declare under penalty of perjury that the forego	ing answers and statements
Signature of Designated Officer	 	

### **SECTION E: AMC NATIONAL REGISTRY FEE COLLECTION (ARSD 20:77:08:01)**

1.	Are you an AM	Conerating in I	Aultinle States?			
	If Yes - Compl		•	ue to Question 2.		
	·	Did this AMC oversee a panel of <b>25 or more</b> certified or licensed appraisers in more than one State within the				
		calculation period, that have been recruited, selected and retained to perform appraisal in connection with a				
	covered transaction?					
		If <b>No</b> - AMC is not eligible for National Registry. Skip to bottom and sign.				
	If <b>Yes</b> - Proceed to AMC Registry Fee Calculation.					
2.	Are you an AMC operating ONLY in Single State (South Dakota)?					
	If Yes - Comple	If <b>Yes</b> - Complete this section:				
	Did this AMC o	versee a panel	of <b>16 or more</b> certified or license	d appraisers in one State within the calculation		
	period, that have been recruited, selected and retained to perform appraisal in connection with a covered transaction?					
	If <b>No</b> - AMC is r	If <b>No</b> - AMC is not eligible for National Registry. Skip to bottom and sign.				
		If <b>Yes</b> - Proceed to AMC Registry Fee Calculation.				
		J	•			
<u> </u>	AC REGISTRY FEE	CALCULATION				
Dι	iring the Calculat	ion Period, hov	rough June 30, 2022   many appraisers performed ap  x \$25.00 =	praisals in connection with covered transactions(National Registry Fee due)	in	
Ву	signing below, I	acknowledge ι	nder penalty of perjury that the	e foregoing statements are true and correct.		
Sic	nature of Design	ated Officer				
JIE	inature or Design	ated Officer	Date			
Pri	nted Name		Email Address	Phone		
PA	YMENT					
		-		. Form can also be printed, filled out legibly and maile		
	To pay by credit/de phone. Form still			w, print & mail form; or call the number below to pay o	over	
Bu	siness Card	Personal	Card Number			
D٥	llar Amount \$		Expiration Date:	CVV2		
20	/ Quit y		Expiration Date.			

**South Dakota Appraiser Certification Program** 

217 W. Missouri Ave, 2<sup>nd</sup> floor, Pierre, SD 57501 | Phone: 605-773-3803 | dlr.sd.gov/appraisers

## **SECTION F: ADDITIONAL INFORMATION**