



APPLICATION FOR RECIPROCAL LICENSE

- Type or print clearly in blue or black ink and provide an original signature.
- All fees paid must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or credit card (see form REA 2030 to pay by credit card)
- By statute, all fees submitted are deemed earned upon receipt.
- All out-of-state addresses require a completed and notarized Consent to Service of Process (REA 3006).
- Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
- If you have any questions please write to the address listed or call (916) 552-9000.
- Mail completed application, fee and qualifying documentation to:
BUREAU OF REAL ESTATE APPRAISERS
3075 Prospect Park Drive, Suite 190
Rancho Cordova, CA 95670

PART A - APPLICANT INFORMATION

Business and Professions Code section 135.4 provides that the Bureau must expedite, and may assist, the initial licensure process for certain applicants described below. Do any of the following statements apply to you:

- You were admitted to the United States as a refugee pursuant to section 1157 of title 8 of the United States Code;
- You were granted asylum by the Secretary of Homeland Security or the United States Attorney General pursuant to section 1158 of title 8 of the United States Code; or,
- You have a special immigrant visa and were granted a status pursuant to section 1244 of Public Law 110-181, Public Law 109-163, or section 602(b) of title VI of division F of Public Law 111-8, relating to Iraqi and Afghan translators/interpreters or those who worked for or on behalf of the United States government.

- ☐ **Yes** If you selected YES, you must attach evidence of your status as a refugee, asylee, or special immigrant visa holder. Failure to do so may result in application review delays.
- ☐ Check this box if you are currently serving or have ever served in the United States military (Please submit proof of current or former military service).
- ☐ Check this box if you are married to, or are in a domestic partnership or other legal union with an active member of the United States military assigned to active duty in California (Please submit proof of marriage, domestic partnership, or other legal union with an active member of the military).

1. Level of License for which you are applying

- ☐ Residential License ☐ Certified Residential ☐ Certified General

2. State of Issuance of License

3. License Number

4. License Expiration Date

5. Name

Last

First

Middle

6. Gender

7. Height

8. Weight

9. Eye Color

10. Hair Color

11. Birthdate

- ☐ Male ☐ Female

12. Driver's License Number

13. Social Security / Taxpayer ID Number

State

14. Business Name

15. Mailing Address (Address of Record)

Address

City

County

State

Zip Code

16. Business Telephone Number

17. Residence Telephone Number

18. Email Address (optional)

19. Color Photo

20. Please Answer the Following Questions

- A. Have you previously submitted an application to BREA?
☐ No ☐ Yes
- B. Do you currently hold, or have you previously held a California Real Estate Appraiser license?
☐ No ☐ Yes, License Number _____

IMPORTANT

- SIGN** (on the back) **of the** 2" x 2" color photo of passport quality.
- Staple **HERE**.

PART B - APPLICANT BACKGROUND INFORMATION

1. Have you ever used or been known by any name other than, or in addition to, the name listed on Part A of this application?
☐ No ☐ Yes, explain _____
2. Do you currently hold a professional or vocational license issued by any governmental agency other than BREA? If yes, please identify the license held, the license number and the issuing agency.
☐ No ☐ Yes, explain _____
3. Have you ever had a professional or vocational license, certificate or registration denied, suspended, restricted, revoked, surrendered or disciplined in any way in this state or any other state? If yes, complete "License Details" section below. In addition to completing the "License Details" section below, you must submit a certified copy of the police report or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint, or accusation and judgment or other order.
☐ No ☐ Yes, complete "License Details" below.

LICENSE DETAILS			
Type of License	License ID No.	License Expiration Date	State
Action (revoked, etc.)	Date of Action	Date Action Terminated	Code Section Violated
ADDITIONAL INFORMATION: ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED AND DATED.			

BACKGROUND CHECK

The State of California requires that all applicants submit for a background check. California resident applicants must have their fingerprints taken at any participating LiveScan location using form *BCII 8016*. For a list of LiveScan fingerprinting locations, please visit:
<http://caag.state.ca.us/fingerprints/publications/contact.htm>

Non-California applicants must have their fingerprints taken on two *FD-258 (Rev. 9-9-13)* cards and should submit both with this application.

I certify under penalty of perjury that the foregoing information, and information provided on all attachments, is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution.

Signature

Date

INSTRUCTIONS

PART A

1. **APPLICATION LEVEL** - Mark the box for the level for which you wish to apply. Mark one box only. You may not apply for a license level higher than the level currently held in your issuing state.
2. **STATE OF ISSUANCE OF LICENSE** - Name of the state in which your current license was issued.
3. **LICENSE NUMBER** - Your current license number.
4. **LICENSE EXPIRATION DATE** - The Expiration date of your current license.
5. **NAME** - Your name.
6. **SEX** - Mark the appropriate box.
7. **HEIGHT** - Your height in feet and inches. Example: 5' 8"
8. **WEIGHT** - Your weight in pounds. Example: 150 lbs.
9. **EYE COLOR** - Do not abbreviate.
10. **HAIR COLOR** - Do not abbreviate.
11. **BIRTHDATE** - Your date of birth. (mm/dd/yyyy)
12. **DRIVER'S LICENSE NUMBER** - Your driver's license number, including the issuing state.
13. **SOCIALSECURITY/TAXPAYERIDENTIFICATIONNUMBER** - Enter your social security or individual taxpayer identification number. **BREA cannot issue a permit without a Social Security or Individual Taxpayer Identification Number.**
14. **BUSINESS NAME** - The name of your business or employer name. **The information required is a matter of public record.**
15. **MAILING ADDRESS** - Your address of record. **The information required is a matter of public record.**
16. **BUSINESS TELEPHONE NUMBER** - Your business telephone number. **The information required is a matter of public record.**
17. **RESIDENCE TELEPHONE NUMBER** - Your home telephone number.
18. **EMAIL ADDRESS** - Your email address.
19. **COLOR PHOTO** - One color 2" x 2" photo of passport quality, of your head and shoulders only, is required. The photo must have been taken within the last 60 days. Sign and date (in ink) on the back of the photo. Staple on the space provided.
20. **QUESTIONS** -
 - A. Mark "yes" if you have previously submitted an application to BREA.
 - B. If you currently or have previously held a California Real Estate Appraisers license, mark "yes" and provide the license number in the space provided.

PART B

1 - 3. BACKGROUND QUESTIONS - Answer all of these questions and attach any required additional information to this application.

BACKGROUND CHECK - California resident applicants must have their fingerprints taken at any participating LiveScan location using form *BCII 8026*. Non-California residents must have their fingerprints taken on two *FD-258 (Rev. 9-9-13)* cards and submitted with this application.

SIGNATURE OF APPLICANT - Original signature and date required.

Privacy Information

Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law.

Bureau of Real Estate Appraisers
Custodian of Records
3075 Prospect Park Drive, Suite 190
Rancho Cordova, CA 95670
Telephone: (916) 552-9000

General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Section 30, Chapter 1361, Section 1, requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers his or her social security number or individual taxpayer identification number which will be furnished to the Franchise Tax Board. Your social security number or individual taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (included, but not limited to, Department of Business Oversight, Department of Insurance, Bureau of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, California Community Colleges Chancellor's Office).