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| **For Board Use Only** | | | |
| Application #: |  | Date Approved: | |
| Registration Fee: $ |  | 🞏 Cash/Check | 🞏 Charge |
| Deposit Date: |  | Processed By: | |
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**Kansas Real Estate Appraisal Board**

**AMC-1**

**Application for Registration of an Appraisal Management Company**

**(Please print or type)**

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| --- | --- | --- |
| **General Instructions** | | |
| * The applicant AMC must submit this form for the individual listed as the Controlling Person and each owner of 10% or more of the AMC. * All questions must be answered. * The AMC-1 and AMC-2 forms are not to be submitted until the fingerprint cards have been imprinted and mailed, by the fingerprinting agency, along with the $47 per card fee made out to the KBI. Submit ALL documents to the Kansas Real Estate Appraisal Board. * Page 4 of the AMC-2 form **must** be completed by the fingerprinting agency at the time the fingerprints are imprinted, verifying how the individual’s identity was confirmed, returned to the party being fingerprinted, and submitted to the Board with the AMC-2 form. * Submit the completed AMC-2 form (pages 1-4) (editable .pdf format) and all supporting documentation to: Kansas Real Estate Appraisal Board, 700 SW Jackson, Ste. 804, Topeka, KS 66603.   Questions regarding the application should be directed to the Board office at (785) 296-6736 or via e-mail to [caroll.a.pessagno@ks.gov](mailto:carol.a.pessagno@ks.gov). | | |
| **Part I – Appraisal Management Company** | | |
| 1. Legal Name: FEIN #: | | |
| 2. All Other Trade or Business Names: | | |
| 3. Business Address:  This must be the businesses physical address Street City State Zip Code | | |
| 4. Mailing Address [if different from the above]  Street or PO Box City State Zip Code | | |
| 5. Business Phone: Fax: Website: | | |
| **Part II – Controlling Person** | | |
| 6. Name: Title: | | |
| 7. Mailing Address:  Street or PO Box City State Zip Code | | |
| 8. Residence Address:  This must be the Agents Physical Address: Street City State Zip Code | | |
| 9. Business Phone: Fax: E-mail: | | |
| **Part III – Description of Entity** | | |
| 10. Legal Structure: ⬜ Domestic Corporation ⬜ Foreign Corporation ⬜ Partnership ⬜ Limited Partnership  ⬜ Domestic LLC ⬜ Foreign LLC ⬜ Sole Proprietor ⬜ Other  If “Other”, describe:  Domiciled in Kansas: ⬜ Yes ⬜ No If the applicant is not domiciled in Kansas, attach proof that the applicant is properly and currently registered with the Kansas Office of the Secretary of State. | | |
|  | | |
| **Part IV – Identification of Ownership** | | |
| List the name of each person or entity that owns ten percent (10%) more of the AMC and their percentage of ownership. | | |
| 1. | 6. | |
| 2. | 7. | |
| 3. | 8. | |
| 4. | 9. | |
| 5. |  | |
| **Part V -Certifications** | | |
| I, , the Controlling Person for the applicant AMC, certify that I have read the within and foregoing application and that the answers supplied, including all supporting documents attached, are true and correct to the best of my knowledge and belief. Further, I certify individually and on behalf of the applicant AMC:   1. That the applicant AMC is legally formed pursuant to applicable state law and shall comply with all Kansas laws necessary to validly operate within the State of Kansas; 2. That the applicant AMC will comply with the Kansas Appraisal Management Company Registration Act and the administrative rules promulgated by the Kansas Real Estate Appraisal Board in all its conduct under any certificate of registration issued pursuant to this application; 3. That no controlling person or any owner of the applicant AMC, held or applied for a credential to act as a real estate appraiser in any appraiser credentialing jurisdiction, which credential was refused, denied, suspended, revoked, or surrendered or not renewed in lieu of a pending disciplinary proceeding against such individual regardless of % owned. 4. That the controlling person or any person owning10% or more of the applicant AMC, pled guilty or nolo contendere to, or had a conviction of A) forgery, embezzlement, obtaining money under false pretenses, larceny, extortion, conspiracy to defraud, or any other similar offense; (B) a crime involving moral turpitude; or (c) any felony charge? (if answered “yes”, you must attach a detailed explanation, to include the individuals name, position (controlling person or owner), the action taken, the state in which the action was taken and if a final judgment has been made.) 5. That the controlling person or any person owning 10% or more of applicant AMC, has been made aware of a disciplinary action or a pending investigating involving their appraiser’s license or certificate in a jurisdiction other that Kansas? (if answered “yes”, you must attach a detailed explanation, to include the individuals name, position (controlling person or owner of 10% or more), the basis of the complaint, the state in which it was filed, and the current status of the complaint. 6. That no final civil judgement has been entered against the applicant AMC, the controlling person or any other person owning 10% or more of the applicant AMC, on the grounds of financial misrepresentation or deceit in the making of any appraisal of real property. 7. Has the applicant AMC had their registration suspended, revoked, placed on probation, or otherwise disciplined in a jurisdiction other than Kansas? (if answered “yes” you must attach a detailed explanation of the action taken, the state in which it was taken, a copy of the documentation finalizing the action taken, and if all requirements of the disciplinary action have been met.) 8. That the applicant AMC has a system in place to verify that a person being added to the appraiser panel of the applicant AMC for appraisal services being performed in Kansas has a credential in good standing in this state pursuant to the Kansas State Certified and Licensed Real Property Appraisers Act and the rules and regulations promulgated thereunder, if such a credential is required to perform appraisals and that the appraiser is geographically competent, and performing appraisal assignments within the appraiser’s scope of practice; 9. That the applicant AMC has a system in place to review appraisal reports, as required by K.A.R. 117-20-7, submitted by each appraiser who is performing real estate appraisal services in Kansas for the AMC on an annual basis to validate that such services are being performed in accordance with USPAP and the Kansas State Certified and Licensed Real Property Appraisers Act and regulations adopted thereunder; 10. That the applicant AMC maintains a detailed record of each service request that it receives for appraisal; services in Kansas and the appraiser that performs real estate appraisal services for the AMC; and 11. That the applicant AMC requires that appraisals are conducted independently and free from inappropriate influence and coercion pursuant to the appraisal independence standards established under section 129E of the truth in lending act.     Date Signature of Controlling Person | | |
|  | | |
| **Part VI – Nonresident AMC - Consent to Jurisdiction of Board and Service of Process** | | |
| Pursuant to L. 2012, Chapter 93, Sections 1-25, I hereby acknowledge and agree that I am the Controlling Person of the applicant Appraisal Management Company (AMC) identified in Part I of this application, and individually and on behalf of the applicant AMC, I do hereby:   * Stipulate and agree to abide by all provisions of the Kansas Appraiser Management Company Registration Act with respect to applicant’s appraisal management activities within this state and submit to the jurisdiction of the board and the state in all matters relating thereto. * Stipulate and agree that the Executive Director of the Kansas Real Estate Appraisal Board shall be appointed as applicant’s agent, upon whom all judicial and other process or legal notices directed to the applicant may be served in the event such applicant become a registrant. Any process or legal notices to the nonresident registrant shall be directed to the Executive Director and, in the case of a summons, shall require the nonresident registrant to answer within 40 days from the date of service on the registrant. A summons and a certified copy of the petition shall be forthwith forwarded by the clerk of the court to the Executive Director, who immediately shall forward a copy of the summons and the certified copy of the petition to the nonresident registrant. Thereafter, the Executive Director shall make return of the summons to the court from which it was issued, showing the date of its receipt by the Executive Director, the date of forwarding and the name and address of the person to whom the Executive Director forwarded a copy. Such return shall have the same force and effect as a return made by the Sheriff on process directed to the Sheriff.     Date Signature of Controlling Person | | |
| **Fee Schedule**  **Registration fees are based on the date the application and all applicable documentation is received by the Board office.** | | |
| **Date Received** | | **Registration Fee** |
| **October 1 through October 31** | | **$1,500** |
| **November 1 through November 30** | | **$1,375** |
| **December 1 through December 31** | | **$1,250** |
| **January 1 through January 31** | | **$1,125** |
| **February 1 through February 28 (29)** | | **$1,000** |
| **March 1 through March 31** | | **$875** |
| **April 1 through April 30** | | **$750** |
| **May 1 through May 31** | | **$625** |
| **June 1 through June 30** | | **$500** |
| **July 1 through July 31** | | **$375** |
| **August 1 through August 31** | | **$250** |
| **We are no longer accepting new AMC Applications during the Month of September due to AMC Renewal Deadlines** | | **~~$125~~** |

AMC PANEL REPORT

**KANSAS PANEL FORM**

**List only those appraisers who meet the following:**

**• Appraiser is an independent contractor;**

**• Appraiser is a licensed or certified appraiser in Kansas or in another jurisdiction under a Kansas Temporary Practice Permit;**

**• Performed one or more appraisals in connection with a covered transaction.**

Applicant is a: ⎕ Single-state AMC

⎕ Multi-state AMC If a multi-state AMC, show total # of states where registered: \_\_\_\_\_\_

Total number of panel appraisers (National): \_\_\_\_\_\_\_\_\_ (To be included on the National AMC Registry, a single-state AMC must have a minimum of 16 panel appraisers; and a multi-state AMC must have a minimum of 25 panel appraisers. If you do not meet the panel requirement, you do not need to pay the National AMC Registry Fee as you will not qualify to be included on the National AMC Registry.)

KANSAS PANEL LISTING

(SEE INSTRUCTIONS ON THE NEXT PAGE COMPLETING THE PANEL LISTING AND CALCULATING THE NATIONAL AMC REGISTRY FEE.)

License No. or Temporary

APPRAISERS NAME PRACTICE Permit No.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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(If additional space is needed, attach a sheet continuing the Panel List)

I HEREBY ATTEST THAT I COMPLETED THE ABOVE PANEL LIST AND THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE CONTROLLING PERSON

**INSTRUCTIONS FOR COMPLETING THE PANEL FORM AND CALCULATING THE NATIONAL AMC REGISTRY FEE**

**If a multi-state AMC, the total number of panel appraisers asks for a nationwide total.**

**KANSAS PANEL FORM**

**List only those appraisers who meet the following:**

**• Appraiser is an independent contractor;**

**• Appraiser is a licensed or certified appraiser in Kansas or in another jurisdiction under a Kansas Temporary Practice Permit;**

**• Performed one or more appraisals in connection with a covered transaction.**