

## APPRAISER RENEWAL APPLICATION

This page is for your records

### GENERAL INSTRUCTIONS

- Complete all fields on the renewal application; incomplete submissions will be returned
- Review your responses for accuracy before signing and submitting the renewal form
- Attach any required documentation, including letters of explanation, court or disciplinary orders, etc.
- Submit completed renewal form, payment of applicable fee and all supporting documents **by email** to [kreab@ks.gov](mailto:kreab@ks.gov) or **by mail** to: Kansas Real Estate Appraisal Board, 700 SW Jackson, Ste 804, Topeka KS 66603. Make checks/money orders payable to **Kansas Real Estate Appraisal Board or KREAB**

### Continuing Education Information

- KREAB CE Cycles run from July 1, Odd Year through June 30 of the following odd year (*ex: July 1, 2025-June 30, 2027*); your required CE must be completed within the 2 year cycle immediately preceding your odd year renewal.
- **Continuing Education Reporting is only required in Odd Years.** The Continuing Education Log on page 3 of this form must be completed for odd year renewals or your application will be deemed deficient.
- The required number of CE hours varies based on length of licensure:  
**0 Hours required if:** you have been licensed for less than 184 days at the time of the odd year renewal  
**14 Hours required if:** you have been licensed for less than one year but more than 184 days at the time of the odd year renewal  
**28 hours required if:** you have been licensed for more than one year at the time of the odd year renewal

#### REQUIRED COURSES:

If you are required to complete 14 or more hours of CE as described above, the hours must include:

- **7 Hour USPAP Continuing Education course** (*formerly USPAP Update Course*)
- **7 Hour Valuation Bias and Fair Housing Laws and Regulations course (VBFH).** *This AQB requirement became effective 1/1/2026; the first time an appraiser completes this course, it must be 7 hours in length. Course must be at least 4 hours in length each time thereafter.*

The USPAP and VBFH Courses must be completed every two-year continuing education cycle. The USPAP course may be taken twice within a two-year education cycle if they are different versions. The 15 hour USPAP qualifying education course **cannot** be used for CE Credit.

### Renewal Deadlines

- Renewals are due by **May 31** of each year; if mailed, renewal must be postmarked by that date to avoid a late fee
- Licenses expire **June 30** of every year; Late Renewals are accepted through September 30
- Licenses not renewed by **September 30** will be canceled on **October 1**; if your license is canceled, you must reapply to reinstate it.

### Fees

**\$240** for **State Licensed, Certified Residential and Certified General.**

**\$200** for **Provisional (Trainee) OR Inactive license** (any classification)

**\$50 Late Fee** for any renewal postmarked (*or submitted by email*) after **MAY 31**

### IMPORTANT REMINDERS

Knowingly filing a renewal on which you have given false or misleading information (*i.e. failing to report disciplinary/legal action, misstating continuing education completed, etc.*) **will result in disciplinary action.**

The renewal application should be completed and signed **by the appraiser whose credential is being renewed.** Do not complete a renewal on behalf of anyone else or allow your renewal to be completed by anyone else.

ONLINE RENEWAL is available to most licensees by logging into the [KREAB Licensee Portal](#). If you renew online, **do not** submit this form.

**APPRAISER RENEWAL APPLICATION**

This form is fillable

|   |                            |              |              |
|---|----------------------------|--------------|--------------|
| <b>NAME</b> (AS LICENSED)   | <b>LICENSE/CERT NUMBER</b> | <b>EMAIL</b> |              |
| <b>HOME ADDRESS</b>   |                            |              |              |
| <b>CITY</b>   | <b>STATE</b>               | <b>ZIP</b>   | <b>PHONE</b> |
| <p>1. Are you the spouse of a military service member or spouse of a former member with an honorable discharge who resides or plans to reside in Kansas?<br/><b>YES NO</b></p> <p>2. Since the issuance of your Kansas license/certificate or your last renewal, whichever is most recent, has there been a denial, revocation, suspension, voluntary surrender, probation or any other disciplinary action taken against your real estate appraisal license/certificate in any jurisdiction <b>other than Kansas</b>?<br/><b>YES NO</b> <i>if yes, attach a detailed explanation of action taken, copy of disciplinary/summary order and proof of completion of any requirements of the order.</i></p> <p>3. Since the issuance of your Kansas license/certificate or your last renewal, whichever is most recent, have you pled guilty or nolo contendere to, or had a conviction of any of the following: <b>A)</b> forgery, embezzlement, obtaining money under false pretenses, larceny, extortion, conspiracy to defraud or any similar offense; <b>B)</b> a crime involving moral turpitude or; <b>C)</b> any felony charge?<br/><b>YES NO</b> <i>if yes, attach a detailed explanation of charge(s)/conviction, copy of the complaint/citation and judgement or sentencing document.</i></p> <p>4. Since the issuance of your Kansas license/certificate or your last renewal, whichever is most recent, has a final civil judgment been entered against you on the grounds of financial misrepresentation or deceit in the making of any appraisal of real property?<br/><b>YES NO</b> <i>if yes, attach a detailed explanation of the civil action taken including the state in which it was taken, and a copy of the judgment.</i></p> <p>5. To your knowledge, is there a disciplinary action being investigated or pending against you in a jurisdiction <b>other than Kansas</b>?<br/><b>YES NO</b> <i>if yes, attach a detailed explanation of the complaint including the state in which it was filed and the current status.</i></p> |                            |              |              |
| <b>CERTIFIED RESIDENTIAL OR GENERAL ONLY</b>  |                            |              |              |
| 6. Are you willing to become a supervisor for a trainee? <b>YES NO</b>  |                            |              |              |

**APPRAISER CERTIFICATION**

*I hereby attest that I completed this renewal application in its entirety and that all information provided is true and correct to the best of my knowledge.*

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE SIGNED

**APPRAISER RENEWAL APPLICATION-CONTINUING EDUCATION LOG**

This form is fillable

**Instructions for completing Continuing Education Log**

CE Reporting is **only required for ODD YEAR renewals (2027, 2029, etc)**. Do not submit this page in even years.

- This log is required for all appraisers who must meet complete **14 or more** CE hours; All fields must be completed for each course logged
- **The 7-Hour USPAP Continuing Education course and 7-hour\* Valuation Bias and Fair Housing Laws and Regulations course** are required (\*course must be 7 hours in length the first time and 4 hours in length every two calendar years thereafter)
- 'Date' must be MM/DD/YYYY format. CE for this cycle must have been completed on or after your issue date OR date of last renewal, whichever is most recent.
- Provider, Course Title and Hours must match what was approved by KREAB; incorrect information may result in your renewal being returned.
- In 'Course Type' column, enter OL for Online or CR for Classroom; If a 'Classroom' course is logged, provide the City & State where it was completed in the 'Location' column.
- The total hours logged must meet or exceed the number of hours you are required to complete
- **DO NOT ATTACH COURSE CERTIFICATES.** If your record is selected for a CE Audit, we will contact you to request copies of your certificates; you must keep course certificates for five years from the course completion date.

| DATE | COURSE TYPE | LOCATION<br>(CLASSROOM ONLY) | PROVIDER NAME | COURSE TITLE | HOURS<br>TAKEN |
|------|-------------|------------------------------|---------------|--------------|----------------|
|      |             |                              |               |              |                |
|      |             |                              |               |              |                |
|      |             |                              |               |              |                |
|      |             |                              |               |              |                |
|      |             |                              |               |              |                |
|      |             |                              |               |              |                |
|      |             |                              |               |              |                |
|      |             |                              |               |              |                |

**APPRAISER CERTIFICATION**

*I hereby attest that I completed this renewal application in its entirety and that all information provided is true and correct to the best of my knowledge.*

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE SIGNED

## PAYMENT AUTHORIZATION FORM

This form is fillable

### CARD PAYMENT INFORMATION

|                            |                   |                            |  |
|----------------------------|-------------------|----------------------------|--|
| APPLICANT/LICENSEE NAME:   |                   | EMAIL ADDRESS FOR RECEIPT: |  |
| <b>Card Information</b>    |                   |                            |  |
| Payment Type               |                   |                            |  |
| <b>Visa</b>                | <b>MasterCard</b> | <b>Discover</b>            |  |
| Card Number                |                   |                            |  |
| Expiration Date            |                   |                            |  |
|                            |                   | CVC                        |  |
| <b>Billing Information</b> |                   |                            |  |
| Street Address             |                   |                            |  |
| City                       | State             | Zipcode                    |  |

**KREAB does not store payment information. This form will be shredded after the payment is processed.**