

**NORTH CAROLINA APPRAISAL BOARD**

5830 Six Forks Road, Raleigh, NC 27609  
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Website: [www.ncappraisalboard.org](http://www.ncappraisalboard.org)  
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**CHANGE OF OWNERSHIP – NEW OWNER OVER 10%**

Use this form when there is a change of ownership over 10% either directly or indirectly to an Appraisal Management Company (AMC) when the Tax ID of the AMC does not change.

**PLEASE TYPE OR PRINT CLEARLY!**

**AMC Name:** \_\_\_\_\_ **Registration #** \_\_\_\_\_

**Does this Owner replace one already on file?**  Yes  No **If yes, who?** \_\_\_\_\_

**Effective date of change:** \_\_\_\_\_

**New Owner Information (use one form per individual):**

Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

**Has the owner ever held an appraisal license?**  Yes  No **If yes, complete the below.**

Appraisal License: State: \_\_\_\_\_ Number: \_\_\_\_\_  
State: \_\_\_\_\_ Number: \_\_\_\_\_  
State: \_\_\_\_\_ Number: \_\_\_\_\_  
State: \_\_\_\_\_ Number: \_\_\_\_\_  
State: \_\_\_\_\_ Number: \_\_\_\_\_

Have you ever been associated with an AMC registered in North Carolina or any other state either as an owner, director, officer, or compliance manager?  Yes  No

If yes, please provide the following: Name of AMC: \_\_\_\_\_

Registration Number: \_\_\_\_\_ Position: \_\_\_\_\_

**I. Regarding Professional Licenses:**

Have you ever had an appraisal license refused, denied, suspended, cancelled, surrendered in lieu of revocation or revoked by the State of North Carolina or any other state?  Yes  No  NA

Are there currently any charges pending against you in connection with an appraiser license in NC or any other state?  Yes  No  NA

*IF ANY OF THE ANSWERS ARE "YES," PROVIDE A COPY OF THE LICENSING AGENCY'S ORDER, ANY OTHER DOCUMENTATION REGARDING THE CASE, INCLUDING THE EFFECTIVE DATE OF THE DISCIPLINARY ACTION, WHETHER THE APPLICANT HAS COMPLIED, AND A COMPLETE WRITTEN EXPLANATION FOR EACH MATTER.*

**II. Regarding Criminal Offenses:**

*"CRIMINAL OFFENSES" AND "CRIMINAL CHARGES" INCLUDE ALL CRIMINAL MATTERS EXCEPT SPEEDING OR PARKING VIOLATIONS.*

*IT DOES INCLUDE DRIVING WHILE UNDER THE INFLUENCE OF ALCOHOL OR DRUGS. IF YOU BELIEVE A CHARGE HAS BEEN ERASED OR EXPUNGED, YOU MUST CHECK WITH THE APPROPRIATE COURT BEFORE COMPLETING THIS SECTION.*

Have you ever been convicted of or pleaded guilty or no contest to any criminal offense in North Carolina or in any other state?  Yes  No

Are there currently any criminal charges now pending against you in NC or any other state?  Yes  No

***YOU MUST ALSO PROVIDE A COMPLETE WRITTEN EXPLANATION OF EACH CHARGE OR CONVICTION WITH THIS APPLICATION.***

**III. Have you ever been known by any other names?**  Yes  No

Other names \_\_\_\_\_

**You must provide a criminal background check obtained from [www.CastleBranch.com](http://www.CastleBranch.com).**

**Package Code: NG97**

**Signature of Owner:** I certify that the information provided in this application is true and correct to the best of my knowledge. I understand that any omission, inaccuracy or failure to make full disclosure constitutes grounds for denial or withdrawal of approval of my designation of Compliance Manager.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_