# State of Tennessee

**Tennessee Department of Commerce and Insurance**

## Real Estate Appraiser Commission

500 James Robertson Parkway
Nashville, TN 37243-1166
615-741-1831

## ☐ Licensed/Certified Renewal

LICENSE/CERTIFICATION NUMBER _____

Expiration Date: _____

Name: _____

Address: _____

_____

Email: _____

## ☐ Reciprocal Renewal*

Please indicate the type of address change by marking an "X" in the appropriate box below. An additional $25.00 is required for address changes.

☐ Business ☐ Home ☐ Mailing

Phone: _____

Fax: _____

Email: _____

Address: _____

_____

| | |
|---|---|
| **Renewal Fee** | **$430.00** |
| **Late/Reinstatement Fee** | **$100.00** |
| **Total Amount Due** | **$_____** |
| **Amount Paid** | **$_____** |

**Return To:**

**State of Tennessee**
**Real Estate Appraiser Commission**
**500 James Robertson Parkway**
**Nashville, Tennessee 37243-1166**

***Reciprocal renewals must also include a copy of current, valid license/certificate from domicile state to be mailed with renewal notice and complete the affidavit below and have notarized. Copies of certificates of education received during the past two years must also be sent with this renewal.**

This is to certify that I, a nonresident licensed or certified appraiser in Tennessee, hold a valid license/certificate in_____, license/certificate #_____. I further certify that I am in good standing and have met all the continuing education requirements of the same.

_____
Printed Name

_____
Signature

**Notary Public**

State of _____

County of _____

_____
Notary Public

My Commission Expires_____

Sworn to and subscribed before me this _____day of _____, _____.