

TEMPORARY PRACTICE APPRAISAL ASSIGNMENT

Name of Client: _____

Client contact person: _____ Phone # _____

Estimated completion date for assignment: _____

Type of property being appraised (i.e., industrial, farmland, etc.): _____

Minnesota Property Addresses to be appraised:

ADDRESS:	ADDRESS:
CITY: _____ COUNTY: _____	CITY: _____ COUNTY: _____
ADDRESS:	ADDRESS:
CITY: _____ COUNTY: _____	CITY: _____ COUNTY: _____
ADDRESS:	ADDRESS:
CITY: _____ COUNTY: _____	CITY: _____ COUNTY: _____
ADDRESS:	ADDRESS:
CITY: _____ COUNTY: _____	CITY: _____ COUNTY: _____

AFFIDAVIT OF APPLICANT

I hereby state that I have fully read and understand the questions presented in this application and have answered them truthfully and completely. I affirm that I have read and agree to comply with all provisions of Minnesota laws and rules governing real estate appraiser licensing and certification.

I agree to provide additional information or documentation that may be deemed necessary to verify information I have disclosed in the application.

I understand that the temporary practice permit is only valid for a single appraisal assignment within Minnesota, and that a single appraisal assignment may include one or more properties under one contract for a single client.

I hereby affirm that I am in good standing in all states in which I currently hold a real estate appraiser license or certification, that my appraiser license or certification is at the level required to appraise all properties listed above, that the foregoing statements are true and correct to the best of my knowledge and belief, and that I have not suppressed or excluded any information that may have a bearing on this application.

I understand that I am not allowed to practice real estate appraisal activity in Minnesota until my application is approved and I am issued a Minnesota temporary practice license.

X

Signature of Appraiser

Date

Print Name of Appraiser