Professional Licensing Agency
402 West Washington Street
Room W072
Indianapolis, IN 46204

Eric J. Holcomb
Governor of Indiana
Deborah J. Frye
PLA Executive Director

Certified General Appraiser, Certified Residential Appraiser, and Licensed Residential Appraiser Reinstatement Form

Your license has been expired for three or more years. To reinstate by mail, please submit this document with the reinstatement fee of $290.00 and continuing education documentation which is to include 28 hours for each renewal missed plus 7 hours of current USPAP to the office address shown above. Make check or money order payable to 'Indiana Professional Licensing Agency 'If you answer 'Yes' to questions 1-3 below send a detailed statement regarding the response with your renewal form.

LICENSEE INFORMATION: Provide current address, phone number and email address			
Licensee Name	License Number	Expiration Date	Renewal Fee $290.00
Street Address			
City	State	Zip Code	
Phone Number	Email Address		

QUESTIONS	
1. Since you last renewed, has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending in any state or U.S. territory?	YES NO
2. Since you last renewed, have you been denied a license, certificate, registration, or permit in any state or U.S. territory?	YES NO
3. Since you last renewed, and except for minor violations of traffic laws resulting in fines and arrests or convictions that have been expunged by a court, have you been arrested, entered into a diversion agreement, been convicted of, pled guilty to, or pled nolo contendere to any offense, misdemeanor, or felony in any state or U.S. territory?	YES NO
4. Have you completed the continuing education required to renew your license? (Required to renew in an active status)	YES NO

STATUS CONFIRMATION	
6. What status do you wish to have upon renewal? • If you answer 'Inactive' the CE requirements are waived. You cannot practice as a real estate appraiser in inactive status.	ACTIVE INACTIVE

LICENSEE AFFIRMATION	
I hereby swear or affirm under the penalties of perjury that I understand and have met the continuing education requirements for renewal, understand the Real Estate Appraiser Board statutes and rules and have answered the questions true to the best of my knowledge.	
Signature of Licensee	Date (month, day, year)

For additional information, please visit us at www.in.gov/pla/.

FOR OFFICE USE ONLY		
Renewal Fee	Receipt No.	Date