



West Virginia Real Estate Appraiser Licensing and Certification Board

Phone: 304.558.3919

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Military Member/Veteran/Spouse Fee Waiver and Military Service Verification

Please type or print clearly in ink.. Form must be attached to your completed application. Failure to submit this form and supporting documentation as required in 190CSR2-16 will result in a delay of processing your request of licensure.

Applicant Information:

Last Name: _____ First Name: _____ MI: _____ Suffix: _____
Social Security Number: _____ Date of Birth: / / Gender: Male _____ Female _____
Email Address: _____ Phone Number: _____
Alt. Email Address: _____ Alt. Phone Number: _____

Contact Information:

Street Address or PO Box: _____
City: _____ State: _____ Zip: _____
County: _____ Country: _____

Affirmation by Written Declaration:

I certify that I am empowered to execute this application as required by 190CSR2-16 Rule of the West Virginia Real Estate Appraiser Licensing and Certification Board. I understand that my signature on this written declaration has the same legal effect as an oath or affirmation. Under penalties of perjury, I declare that I have read the foregoing application and the facts stated in it are true. I understand that falsification of any material information on this application may result in criminal penalty or administrative action, including a fine, suspension or revocation of the license.

Signature _____ Date _____

Print name _____

The disclosure of the Social Security number is required on all applications for Professional Occupation Licensure in West Virginia under WV Code § 30-1-6 (d).