## Fee or Roster Designation Application for Fee Personnel Designation

Check One	U.S. Department of Housing and Urban Development (HUD)
	Department of Veterans Affairs (VA)

HUD OMB Approval No. 2502-0538 (EXP. 4/30/2003)

VA OMB Approval No. 2900-0113

Important Notice About Information Collection: We need this information to enable the designated agency to determine whether you qualify for designation in the position for which you are applying. The Department of Housing and Urban Development (HUD) is authorized to collect this information by Title 1, Section 1 of the National Housing Act (Pub. L. 479, 48 Statue 1246, 12 U.S.C., 1701 et seq.). The Department of Veterans Affairs (VA) is authorized to collect this information by Chapter 37, Title 38, United States Code. We estimate that you will need an average of 20 minutes to review the instructions, find the information, and complete this form. These agencies cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.whitehouse.gov/library/omb/OM BINVC.html# VA. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

Privacy Act Statement: These agencies will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 5, Code of Federal Regulations 1.526 for routine uses (for example: Authorized release of information to Congress when requested for statistical purposes) identified in VA system of records, 17VA26, Loan Guaranty Fee Personnel and Program Participant Records, published in the Federal Register. Giving us your Social Security Number account information is mandatory. The Housing and Community Development Act of 1987, 42 U.S.C. 3543 authorizes HUD to collect the Social Security Number. The Department of Veterans Affairs (VA) is authorized to collect this information by Chapter 37, Title 38 U.S.C. Failure to provide any of the requested information could affect the decision to approve your application since this decision will be made only on the basis of available information we currently have on record.

Instructions: Please use typewriter or print clearly. This application is to be submitted to HUD only after the appraiser is State licensed or certified to appraise and has passed the HUD/FHA Appraisal Examination. Mail the completed form to the VA Regional Office or the HUD Homeownership Center (HOC) having supervision over the area in which you intend to operate. HUD/FHA appraisers may ascertain an appraiser's FHA roster status from HUD's web site at: www.hud.gov. If this application is to be submitted to the VA, an executed VA Form 26-6684, Statement of Fee Appraisers or Compliance Inspectors must be attached.

Designation being applied for: Ap	praiser Real E	state Compliance			
Name of Applicant (first-middle-last)	2.	Date of Birth (mm/dd/yyyy)	3. Social Security Numb	per HUD required/VA Voluntary	
				3a. Sex (1) Male	
4. Residence Address (number and street or rural r	oute, city or P.O.,	ounty, State, zip code)	5. Telephone Number		
			(Include area code)	3b. Race (Select one or more	
				(1) White	
				(2) Black or African American	
			7. Business Phone		
6. Business Address (Address where field reviews		(Include area code)	) (4) American Indian/ Alaskan Native		
				Alaskan Native (5) Native Hawaiian or	
				☐ ` ´ Other Pacific Islande	
				3c. Hispanic or Latino	
				YES NO	
8. Present Occupation	9. Name and A	Address of Present Employer		10. Education No. of Years	
			a. High School		
				b. College	
				c. Degree(s) Awarded (If applicable	
11. Special Education or Training, Vocational, Busi For HUD/FHA Appraisal Examination Information	ness, or Special c on (Enter city, Sta	courses (Enter course and sct te, and date (mm/dd/yyyy) of	hool name and location) Examination; attach a co	ppy of the certification)	
12. Professional Organizations of which you are a	13. Registration/License Inf	formation (Attach copy(ie	s) of appraisal license)		
	Kind	Registration/License	State Where Issued Expiration Da (mm/dd/yyy		
14A. Have you been previously approved by VA or HUD for a Fee Position?	14b. Office Name & Address		14c. Dates of Fee Activity For VA or HUD		
			From: (	(mm/dd/yyyy) To: (mm/dd/yyyy)	
Yes (If "Yes," complete Items 14b &14c)					
□ <sub>No</sub>					
15. Geographic Area(s) of Practice (List your appra	isal area(s), e.g.	Albany, NY; Ft. Worth, TX; Cl	leveland, OH; etc.)		

16 Ctata Dringinal Assignme	nto during at least the past Five	ara (attach additional about as naces	nom d
	Number of Assignments   Nam	ars (attach additional sheet as necess	sary)
. 3.132 (		oo o, olollo o, o,galliaalio.o	
17. Business History During Dates (mm/dd/yyyy)	Past 10 Years (attach additional	sheet as necessary)	
From To	Occupation	Name of Employer	Address
18 For <b>VA</b> List and Submit	at least 3 letters attesting to you	ir qualifications. <b>HUD</b> Requires three	Reference Contacts only
References	at loads a foliare alleating to you	Occupation	Address
redeficies			Address
following certifications are t	o be completed by personnel	qualified to receive assignments from	st and to ensure compliance with HUD appraisal standards, the com HUD or HUD approved lending institutions for HUD/FHA rest" held by relatives, business associates, or other controlled
(b) I certify that I do not activ (c) I certify that I will not acc (d) I certify that I am not curr (e) I certify that I will comp mortgagee letters) and all oth	rely engage in the management sept any assignments for fee wo ently suspended, debarred, or in ly with HUD Handbook 4150.2 ner instructions and standards, in	n performing all appraisals on propert	oing business with HUD. interest.
20a. Number of assignments you will accept per week	20b. <b>or</b> hours you will work	20c. Maximum No. of assignments you will accept at one time	
<ul> <li>(b) In performing fee wor</li> <li>(c) My sole interest in all</li> <li>(d) An appraisal is a sub</li> <li>FHA will rely upon the</li> <li>I hereby certify that to the be</li> </ul>	application does not constitute not may status is that of an independent transactions shall be to perform stantial and material element in accuracy and truthfulness of a	n fee assignments as required by HUI the determination of the eligibility of a n appraisal completed by me in appro mation stated herein, as well as any ir	D or VA standards and criteria. an application for FHA mortgage insurance, and HUD/
sanctions, or other regulatory (i) Fines and imprisonmer \$500,000 for organizatio (ii) civil penalties and dama which the government s	r actions, including but not limite at under 18 USC 287, 1001, 101 ons or imprisonment for up to 5 yages under 31 USC 3729, of no ustains; and	ed to: 0, 1012, which provides for fines of a years, or both; or	r within the jurisdiction of HUD is subject to penalties, maximum of \$25,000 for individual and \$10,000, plus 3 times the amount of damages
21. Date Signed (mm/dd/yyyy)	22. Applicant's Signature (do not	·	
Reviewing Official Cor	nnlete the following items		
23. This Application has been revand I hereby recommend			cer
	sapproval mended in the county(ies) appr	aisal areas and/or State shown below	
26. County(ies)			27. State