SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION

APPRAISER CERTIFICATION PROGRAM

123 W. Missouri Ave., Missouri River Plaza, Pierre, SD 57501 Tel: 605.773.3803 dlr.sd.gov/appraisers

APPLICATION FOR CREDENTIAL BY RECIPROCITY

APPRAISAL SUBCOMMITTEE – AUTHORIZATION FOR RELEASE OF SOCIAL SECURITY NUMBER: I hereby: authorize Do Not authorize The Department of Labor and Regulation to release my Social Security Number to the Appraisal Subcommittee for use as the unique identifying number for the National Registry of Real Estate Appraisers Certified General Fee: \$400 + National Registry Fee \$40 = \$440			FOR OFFICE USE ONLY: Date Application Received National Registry DSS: Date Issued: All fees are NON-REFUNDABLE			
Certified Residential Fee: \$375 + National Registry Fee \$40 = \$415 State License Fee: \$350 + National Registry Fee \$40 = \$390			Please make checks payable to the Appraiser Certification Program.			
••	e-Licensed	State-Certified Resid			ied General	
First Name:						
Driver License or State-Issue						
Home/Mobile phone:						
Date of Birth:		Email:			_	
Residence Address:		City		State:	Zip:	
County:						
Business Name:						
Business Address:		City		State:	Zip:	
Original appraiser credential	issued under th	e laws of the state of:				
State-licensed	State-Cer	tified Residential	State-C	Certified General		
Credential No:		Dated:		Expiration Date	:	
Provide a Letter of Good Star	nding / History L	etter from the original iss	uing state	e.		

ACP – Reciprocity 1 of 3 Rev. 03/2024

What othe	er credentia	als do you h	old? Indicate	state, licer	nse/certifica	te number, a	and type fo	r each one	:	
Is your spo	ouse an act	tive-duty m	ember of th	e armed fo	rces?	Yes*	No			
If yes, is yo	•	-	military trar Yes*	sfer to Sou No	th Dakota, a	and did you	leave empl	oyment to	accompany	your
Please cho	ose either	"yes or no	" for each qu	estion belo	ow:					
	ation, prob		tate apprais y other metl			•	•	-	sure, reprimaurisdiction?	and,
	you ever be		an appraise	r certificate	or license i	n South Dak	ota or any	other stat	e or jurisdicti	ion?
c) Are there any investigations, complaints, or disciplinary action currently pending against you as a real estate appraiser or as a licensee or certificate holder in another regulated occupation, trade, or profession, in South Dakota or in any other state or jurisdiction? Yes* No										
metho	od or discip	•	rtificate or li	cense by a		•			ion or any ot ssion in this s	
			found guilt essault, failu					g violatior Yes*	n? (e.g., DUI, No	
	•		ed or pled g ompetent ju	•				•	oral turpitude	e or to
If you ansv	wered "yes	s" to any of	these quest	ions, attach	n an explana	ition.				

SWORN DECLARATION

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 the South Dakota Department of Labor and Regulation, Appraiser Certification Program License laws and rules. I acknowledge that my failure to make a full and accurate disclosure of any information called for herein may result in the denial of, and/or revocation of my application for temporary practice.

I agree to provide additional information or documentation as may be deemed necessary by the South Dakota Department of Labor and Regulation, Appraiser Certification Program for the verification of the information I have disclosed in this application.

I acknowledge that I understand that the Temporary Practice Permit obtained hereby is not valid for any individual other than myself. I acknowledge that I understand that the state of South Dakota may have requirements in addition to this application and that it is my responsibility to comply with South Dakota's requirements.

I understand that I am not allowed to practice real estate appraisal activity in South Dakota until my application is approved and I am issued a Temporary Practice Permit.

I hereby declare and affirm under penalty of perjury that this application has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.					
Signature of App	licant	Date of Signature			
IRREVOCABLE	CONSENT:				
State of:	(Applicant's Home State)	_			
County of:	(Applicant's Home County)	_			
I, by applying my signature below, hereby submit an irrevocable consent that service of process upon me may be made by delivery of the process to the secretary of the South Dakota Department of Labor and Regulation if the plaintiff cannot, in the exercise of due diligence, effect personal service upon me and action against me in a court in South Dakota arising out of my temporary appraisal activities as a real estate appraiser in South Dakota.					

Application Submission and Fee Payment:

Signature of Applicant

Application Submission – Mail the completed application, fee, and any supporting documents to: South Dakota Appraiser Certification Program, 123 W. Missouri Ave., Missouri River Plaza, Pierre, SD 57501 or via email to DRR.AppraiserCertification@state.sd.us.

Date of Signature

Payment Methods – Please make check or money order payable to Appraiser Certification Program. For your security, we are no longer accepting credit payments via email.