

NOVA SCOTIA REAL ESTATE APPRAISERS ASSOCIATION

APPLICATION

for registration to practice real estate appraising

Name of Applicant _____

Civic Address _____

Mailing Address (if different from civic address) _____

Town/City Province/State Country _____

Postal Code Telephone Fax _____

E-mail _____

Name of Employer _____

Employer's Address _____

Town/City Province/State Country _____

Postal Code Telephone Fax _____

E-mail _____

Preferred Mailing Address Civic Business _____

EMPLOYMENT HISTORY

List the names and addresses of your employers for the last five years. (Attach separate sheets to detail type of work you have done, and typical clients.)

From Month/Year	To Month/Year	Name/Address of Employer	Position
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EDUCATION

High School
Name _____ Province/State _____ Year Graduated _____

College or University
Name _____ Degree Received _____ Date _____

PROFESSIONAL LIABILITY INSURANCE or BOND OF INDEMNITY

The Association requires all members who engage in the practice of real estate appraisal to carry and maintain professional liability insurance (or a bond of indemnity) in an amount of not less than one million dollars. Please provide the following details:

- Named Insured _____
- Insurer _____
- Policy Period _____
- Limits of Liability _____
- Deductible _____

Please attach a copy of proof of professional liability insurance (or bond of indemnity) to the back of this completed form.

ASSOCIATE MEMBERSHIP

A person applying for registration as an Associate Member must undertake not to engage in the practice of real estate appraisal. Please ensure that the form entitled “Associate Member’s Undertaking” is completed and accompanies your application form.

GOOD CHARACTER

Under the Act, an applicant must satisfy the Committee of Examiners that the applicant is a person of good character. Accordingly, in submitting this application for membership in the Association, the Committee of Examiners requires you to:

1. Complete the Certificate of Good Character form; and
2. Provide three references.

NOTE: Before an application for membership will be processed, the applicant must sign the “Member’s Agreement”. Please ensure that the Member’s Agreement form is completed.

I hereby certify that the information provided above is true and correct.

Date

Signature