



# Certification of Appraisers

Return completed form to GGAR by December 31, 2017.

I certify that the following individuals are licensed with my firm and their licenses are current. (Active through September 30, 2019)

Office Name \_\_\_\_\_

City \_\_\_\_\_

Appraisers Signature \_\_\_\_\_

Date \_\_\_\_\_

Please list each appraiser's name and their license number below. List each Secretary/Admin by name & use "Secretary" for the License #. Attach a copy of all licenses and Return via fax: 618-692-8307 or email to

[slading@gatewayrealtors.com](mailto:slading@gatewayrealtors.com)

**Please Print:**

Name \_\_\_\_\_ License # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name \_\_\_\_\_ License # \_\_\_\_\_ Exp. Date \_\_\_\_\_

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Name \_\_\_\_\_ License # \_\_\_\_\_ Exp. Date \_\_\_\_\_