

DBPR RE-2065 – Request for Change of Status – All Appraiser Designations

**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

1940 North Monroe Street
Tallahassee, FL 32399-0750
Customer Contact Center: 850.487.1395
FAX: 850.488.8040
www.myfloridalicense.com/dbpr

CHECK ACTION REQUESTED	
Action Requested	
<input type="checkbox"/> Request Activate License (Physical Business Address Required) <input type="checkbox"/> Request Inactive License <input type="checkbox"/> Add additional Business Address – No Fee <input type="checkbox"/> Register Business / Firm Name and Address	

APPRAISER DESIGNATION	
License or Certification Number	Appraiser's Designation <input type="checkbox"/> Registered Trainee Appraiser <input type="checkbox"/> Certified Residential Appraiser <input type="checkbox"/> Certified General Appraiser <input type="checkbox"/> Licensed Appraiser
Appraiser's Name	Appraiser's Contact Information Telephone number _____ E-mail address _____

PRIMARY BUSINESS OR FIRM NAME AND ADDRESS			
Business or Firm Name			
Address			
City	State	ZIP	
County	Country		
Business Phone Number	Business e-mail address		

ADDITIONAL LOCATION			
Additional Business or Firm Name			
Street Address			
City	State	ZIP	
County	Country		
Business Phone Number	Business e-mail address		

ATTEST STATEMENT	
I affirm that I have provided the above information completely and truthfully to the best of my knowledge.	
Licensed or Certified Appraiser	
Sign Here _____	Date _____
Required for all action requests	