

**STATE OF NEVADA  
DEPARTMENT OF BUSINESS AND INDUSTRY  
REAL ESTATE DIVISION**

3300 W. Sahara Ave., Suite 350, Las Vegas, Nevada 89102 \* (702) 486-4033  
e-mail: [realest@red.nv.gov](mailto:realest@red.nv.gov) \* <http://red.nv.gov/>

**APPLICATION FOR AN ORIGINAL OR RENEWAL OF AN  
APPRAISAL MANAGEMENT COMPANY BRANCH OFFICE**

The Branch Office registration must be renewed at the corresponding renewal date of the Appraisal Management Company.

Check One Box:     **New Branch Office - Fee: \$100.00**                       **Renewal - Fee: \$100.00**

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**Date:** \_\_\_\_\_ **AMC Registration Number:** \_\_\_\_\_

**AMC Name:** \_\_\_\_\_

**Branch Office Physical Location:** \_\_\_\_\_

*Street*

*City*

*State*

*Postal Code*

**Mailing Address** (if different from office location):

*P.O. Box/Street*

*City*

*State*

*Postal Code*

**Phone:** (    ) \_\_\_\_\_

**Fax:** (    ) \_\_\_\_\_

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A Principal, Partner, Officer, Director, or Trustee designated to act on behalf of the Appraisal Management Company must authorize the contact person for each branch office. Indicate the contact person below and provide your signature:

Location Contact Person: \_\_\_\_\_ (print or type clearly)

***The named contact person is authorized by herein named Appraisal Management Company to act on behalf of the company at this branch office.***

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

X \_\_\_\_\_

(Signature of Designated Principal, Partner, Officer, Director, or Trustee )