Arkansas Appraiser Licensing and Certification Board
900 W. Capitol, Suite 400
Little Rock, AR 72201

FORM FOR FILING A COMPLAINT
AGAINST AN APPRAISAL MANAGEMENT COMPANY

This form should be used when filing a complaint against a registered Appraisal Management Company, hereinafter “AMC.” Please fill in all information listed below. The completed form is needed to expeditiously process the complaint.

Your complaint becomes public record and a copy of it will be given to the AMC complained against.

IMPORTANT

The Arkansas Appraiser Licensing & Certification Board, hereinafter “ALCB” investigates complaints against registered AMCs accused of violating state law and/or the ALCB’s statutes or rules and regulations. If the Board finds that a registered AMC has violated the governing standards, it can only suspend or revoke licenses. The Board cannot order an AMC to refund appraisal fees or pay damages.

MONETARY RELIEF IS NOT AVAILABLE FROM THIS BOARD.

The Arkansas Appraiser Board cannot give legal advice or act as your attorney.

Name of Complainant: ____________________________

Mailing Address: ________________________________ Street Address ________________________________ City __________________________ State ______ Zip ______

Home Phone: ( ) ____________________________ Work /Daytime Phone: ( ) ____________________________

E-mail: ____________________________
AMC COMPLAINED AGAINST

Name of Appraisal Management Company: ________________________________________________________

Contact Person: ____________________________________________________________________________

Registration No: ___________________________ Phone: ____________________________________________

Address: ________________________________________________________________________________

    Street Address    City    State    Zip

INFORMATION ABOUT YOUR COMPLAINT

Have you contacted the AMC about your complaint? (Yes/No) ______________________________________

If yes, please provide additional information:

Date of Contact: _________________________ Person Contacted: ______________________________________

Results: __________________________________________________________________________________

Does your Complaint involve a specific appraisal? (Yes/No) __________ Date of Appraisal: __________________

Location of Property: _______________________________________________________________________

      Appraisal Order No: ______________________________________________________

Please describe your complaint and state facts clearly and concisely below or on another sheet. Attach a copy of the appraisal report(s) and any documents or data you must to support your allegations.

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