



REAL ESTATE APPRAISAL EXPERIENCE LOG

Authority: 1980 PA 299

Bureau of Professional Licensing
PO Box 30670 • Lansing, MI 48909

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APPLICANT NAME: _____ LICENSE #: _____

Date of Report & Number, if applicable		Property Address, City, State, Zip Code	Property Type		Type of Report S.R. 2-2 (a) (b)		Complexity		Check applicable description of work performed by indicating A or S											Total Hours Requested						
			Residential	Non-Residential	Appraisal Report	Restricted Appraisal Report	N = Non-Complex	C = Complex	A - Applicant	S - Supervisor	Inspection was Supervised	Interior Inspection	Land/Site Inspection	Neighborhood Analysis & Description	Research & Verification of Comparable Sales	Cost Approach	Sales Approach	Income Approach	Final Reconciliation	Other: Explain on Separate Page	Signature on Report & Certification (Y/N)	Residential	Non Residential			
Date of Report	Number								A	S																
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Supervisor Certification

By signing the Supervisor Certification below I acknowledge that it is the joint responsibility of both the Supervisory Appraiser and the Applicant to ensure the experience log is accurate, current, and complies with all applicable laws, administrative rules, and applicable regulations for the appraiser profession. I certify that I have completed a course that, at a minimum, complies with the specifications for course content established by the AQB, which is specifically oriented to the requirements and responsibilities of Supervisory Appraisers and Trainee Appraisers. I certify that the experience documented in this log is USPAP compliant and has been obtained by time spent in the appraisal process according to all applicable laws, rules, and AQB Criteria. I certify all information in this log to be true and correct and understand that any misrepresentation or fraud may be cause for disciplinary action. I understand all licensees may be subject to an audit of applicable records by the Department and failure to properly maintain records or provide evidence of compliance may be cause for disciplinary action. I certify that I am a state-certified appraiser in good standing for not less than three (3) years prior to acting as a Supervisory Appraiser. I am not supervising more than three (3) Trainee Appraisers at one time.

Total This Page: _____
TOTAL HOURS: _____

Supervisor's Name: _____ Supervisor's Signature: _____
License #: _____ Date: _____

Page No. _____ of _____