



**Financial Enterprise Licensing Section**  
**Arizona Department of Insurance and Financial Institutions**  
 100 North 15th Avenue, Suite 102, Phoenix, AZ 85007-2630  
 Phone: (602) 771-2800, option 1  
 Web: <http://dfi.az.gov> | Email: [FELicensing@difi.az.gov](mailto:FELicensing@difi.az.gov)

In accordance with Title II of the "Americans with Disabilities Act" this information is available in alternative format.

**NOTIFICATION OF ENGAGEMENT  
 BY DESIGNATED SUPERVISORY APPRAISER**

<b>DESIGNATED SUPERVISORY APPRAISER</b>	
Supervisor Registration #: _____	Certified Residential/General #: _____
Supervisor's Name <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. _____	
First	M.I.
Last	
Phone #: _____	Email: _____
<i>A Supervisory Appraiser is limited to only three Trainee Appraisers at any one time.</i>	

<b>TRAINEE APPRAISER</b>	
Trainee Appraiser Registration#: _____	
Trainee's Name <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. _____	
First	M.I.
Last	
Phone #: _____	Email: _____
<i>A Trainee Appraiser is permitted to have more than one Supervisory Appraiser.</i>	

**SUPERVISOR'S CERTIFICATION**

I hereby agree to supervise the above named Trainee Appraiser. I will abide by the provisions of the Arizona Appraisal Statute under Title 32, Chapter 36 and Rules under Arizona Administrative Code Title 4, Chapter 46 Article 2. I understand that my certification may be revoked or other disciplinary action taken, if I violate the Arizona Appraisal Statutes or Rules.

I will not allow anyone to act as an Appraiser Trainee for me until an authorization has been issued by the Department of Financial Institutions authorizing this person as an Appraiser Trainee under my supervision. If this applicant is granted Appraiser Trainee status, I agree to be responsible for the person's professional conduct and to have the trainee perform appraisals only under my active, personal and diligent direction and supervision (except when the trainee is working under another Designated Supervisory Appraiser). I agree to actively, personally inspect with, diligently supervise the appraiser trainee, until such time as I notify both the Department and the appraiser trainee, in writing, that our association has been terminated.

By my signature below, I certify that I have fully read and understand the information on this form.

**Supervisor's Signature** \_\_\_\_\_ **Date Signed** \_\_\_\_\_

<b>Notice to Applicant Pursuant to A.R.S. § 41-1030</b>
An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a license requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.
This section may be enforced in a private civil action and relief may be awarded against the State. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the state for a violation of this section.
A State employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the Agency's adopted personnel policy.
This section does not abrogate the immunity provided by section 12-820.01 or 12-820.02