

PENNSYLVANIA ANTIQUES

APPRAISERS' ASSOCIATION

PAAA MEMBERSHIP APPLICATION

Application Date _____

Name _____ Sponsor _____

Address _____

City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____ Cell Phone _____

Email Address _____ PA Sales Tax Number _____

CONFIDENTIAL

How long have you been doing appraisals? _____

Provide names of 3 clients _____

Do you agree to provide each client with a written appraisal & receipt for fee? _____

Do you agree to maintain a record of each appraisal to protect the client? _____

Do you agree to keep appraisal records **CONFIDENTIAL** in your files? _____

Have you ever been convicted of a misdemeanor or felony involving embezzlement and/or bad checks, misappropriation of funds, within the past ten years? _____

What other Associations are you now a member? _____

List 3 references with names and contact information _____

Why do you wish to become a Certified Appraiser? _____

A copy of a recent appraisal is attached Yes _____ No _____

\$50 Initiation fee enclosed Yes _____ No _____ \$ _____

\$100 Annual Membership enclosed Yes _____ No _____ \$ _____

Official Use Only

Approval Date _____ By _____

Seal Presented _____ By _____

Pennsylvania Antiques Appraisers' Association By _____

Date _____ Countersigned _____