Kentucky Real Estate Appraisers Board
Appraiser Assignment Log (Please Print)

Name: _____

Associate License Number: _____

Signature: _____ Date Signed: _____

Hours Requested: *This page* _____ *Total* _____

Applicants must enter actual hours, subject to maximums approved by the Board.

Rev. 06/2014

Report Date	Subject Property Address	Report Type	Property Type	Client named in report	MarketValue Opinion	A - Associate / S – Supervisor	I. Developed Site Desc. & Analysis	II. Developed Bldg. Desc. & Analysis	III. Nbhd Description & Dev. Analysis	IV. Developed the Highest & Best Use	V. Collected, Verified, and Analyzed Data	VI. Developed Income Approach	VII. Developed Cost Approach	VIII. Developed Sales Comparison	IX. Developed Final Reconciliation	X. Other (please attach explanation)	Associate Hours
						A											
						S											
						A											
						S											
						A											
						S											
						A											
						S											
						A											
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						A											
						S											

Report Type: Restricted Appraisal Report **= R** Appraisal Report **= AR** - **Property Type:** 1 to 4 Residential units/lots **= R** or Greater than 4 Residential units/lots **= G**

Associates must:

1) Indicate the part(s) of each assignment the *Associate* contributed by putting an "x" in the Columns I thru X. (Supervisor must accompany associate on first 50 assignments)

2) Prepare a separate log for each *Supervisor* and have each supervisor follow instructions 3 & 4 below. (Only CG may supervise assignments greater than 1 to 4 units.)

3) For each part(s) of each assignment, Supervisors must indicate whether they: **P** – Had **P**rimary Responsibility **C** – **C**o-appraised **R** – **R**eviewed and Approved

By signing this document, both the Supervisor and the Associate certify that any material misrepresentation shall be punishable as perjury, in the first degree, a felony crime, (KRS 523:020) and shall also be grounds for suspension, revocation or refusal to renew any certificate or license granted to same.

4) **Supervisor Name (Print)** _____ **Supervisor's KY Cert. No.** _____

  Supervisor Name (Sign) _____ **Date Signed** _____