



**State of Rhode Island
Department of Business Regulation
Division of Commercial Licensing
Real Estate Appraisers Section
1511 Pontiac Ave, Bldg. 69-1
Cranston, RI 02920**

**REQUEST FOR CERTIFICATE OF LICENSURE
(LETTER OF GOOD STANDING)**

Jurisdiction (s)/state for which certificate is requested: _____

D.O.B. _____ License/Certification No. _____
(For I.D. Purposes)

Name of Licensee: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Cell: _____

E-mail: _____

How did you obtain your license/certification? Reciprocity Examination

Address where certificate is to be mailed: _____

FEE: \$10.00 for each certificate requested. Please make check payable to the Rhode Island General Treasurer.

NOTE: A certificate of licensure will be issued within five (5) days after receipt of request.