BCS/LAP-310 (1/09)

Michigan Department of Energy, Labor & Economic Growth
Bureau of Commercial Services
Licensing Division
REAL ESTATE APPRAISERS
P.O. Box 30219, Lansing, MI 48909
517-241-8720
www.michigan.gov/appraisers

REAL ESTATE APPRAISAL EXPERIENCE LOG

NAME: _____ LICENSE: _____

AUTHORITY: P.A. 299 of 1980, as amended
COMPLETION: Voluntary
PENALTY: Failure to complete may result in denail of your application

Instructions: Copy as needed. Add entries in chronological order. The use of this form is not mandatory, but information requested must be provided to document appraisal experience as required by the Michigan Occupational Code, PA 299 of 1980, as amended. PENALTY: Failure to complete may result in denial of your application. **ASSIGNMENT IDENTIFICATION** Instructions: Under Property Type, indicate VL for Vacant Land, IND for Industrial or C1 for Single-Tenant Commercial Properties or CM for Multiple-Tenant Commercial Properties, R1 for Single Family Residential & RM for 2-4 Family Residential Properties.

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

Supervisor's Signature _____ License: _____ Total This Page: _____

Date: _____ TOTAL HOURS: _____