



R/W-AC, APPRAISAL CROSS CERTIFICATION COMPLETION APPLICATION

Once all requirements are met, complete and submit this application with your non-refundable recertification fee of \$50 USD (for members) or \$70 USD (for non-members), including all the required supporting documents to your Chapter Professional Development Chair (PDC Chair) or through the Credentialing Concierge for initial review and approval.

Only complete applications will be processed. All incomplete applications will be returned.

Processing of applications may take up to four (4) weeks.

Applicant Information

Full Name: _____

Membership/ID Number: _____ Chapter Number: _____

Street Number/Name: _____ Suite # _____

City/State/Zip-Postal Code: _____

Phone: _____ Personal Email: _____

Employer Information

Company Name: _____

Street Address _____ Suite #: _____

City, State/Province: _____

Zip/Postal Code: _____ Phone: _____

Work Email: _____

For any question on the requirements, contact your Chapter PDC Chair or the Credentialing Manager.

Payment Information

Type of Payment: Check enclosed - # _____ (payable to IRWA):

Credit Card: Visa MasterCard American Express Discovery

Card # _____ Expiration Date: _____

Signature: _____ Amount: \$ _____

Name as it appears on the card: _____



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PATH 1 QUALIFICATION

Please indicate below, which qualifications you meet for each category. Copy of documentation must be submitted at the time of application.

PATH 1: Appraisal Foundation Sponsor member or Appraisal Institute member:

Designation Hold the Senior Real Property Designation in any of The Appraisal Foundation Appraisal Sponsor Organizations.

OR

Designation Hold a Senior Designation (i.e., MAI, AI-GRS, SRPA) with the Appraisal Institute.

AND

Certification Be a State Certified General Real Estate Appraiser.

Copy of documentation must be submitted: Proof of Designation, license, certification.



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PATH 2 QUALIFICATION

Please indicate below, which qualifications you meet for each category. Copy of documentation must be submitted at the time of application.

PATH 2: Appraisal Foundation International Sponsor member or Appraisal Institute of Canada or China Real Estate Valuers Association(CREVA) member:

Designation Hold the Senior Real Property Designation from one of The Appraisal Foundation Appraisal International Sponsors Organizations.

OR

Designation Hold a Senior Designation (AACI) with the Appraisal Institute of Canada or China Real Estate Valuers Association (CREVA) Senior member.

AND

Certification If required by law or regulation, be a jurisdictionally licensed real estate appraiser.

Copy of documentation must be submitted: Proof of Designation, license, certification.



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PATH 3 QUALIFICATION

Please indicate below, which qualifications you meet for each category. Copy of documentation must be submitted at the time of application.

PATH 3: IRWA affiliate organization member:

Affiliate Member Be a member of an IRWA affiliate member organization.

AND

Qualifying hours of experience Have three thousand verifiable hours of real property appraisal experience obtained during no fewer than thirty months. One thousand five hundred hours (of the three thousand hours) must be in non-residential real property appraisal work.

AND

Designation If granted, hold the Senior Designation with the IRWA affiliate member organization.

AND

License If required by law or regulation, be a jurisdictionally licensed real estate appraiser.

Copy of documentation must be submitted: Proof of Designation, license, certification.



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PATH 1 AND 2 COURSEWORK & ETHICS CHECKLISTS

IRWA Coursework Checklist: *Complete the following and attach copy of course completion certificates.*

401, The Appraisal of Partial Acquisitions, 40 credit units

Or

401C, The Appraisal of Partial Acquisitions (Canadian), 40 credit units

Or

421, The Valuation of Partial Acquisitions, 32 credit units

Or

421C, The Valuation of Partial Acquisitions (Canadian), 32 credit units

And

431, Problems in the Valuation of Partial Acquisitions, 8 credit units

IRWA Ethics Checklist: *Attach a copy of course completion certificate.*

Choose one:

102, Elevating Your Ethical Awareness, 8 credit units

103, Ethics and the Right of Way Profession, 8 credit units

104, Standards of Practice for the Right of Way Professional, 8 credit units



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PATH 3 FORMAL EDUCATION AND COURSEWORK CHECKLISTS

Formal Education Checklist: *attach copy of diploma or degree*

Degree Hold a University Degree

Or

Complete all: *attach copies of transcript or certification completion*

30 hours of university courses University courses in economics, finance, statistics, business law, real estate law, real estate, accounting, and business management.

300 hours of real property education As listed in The Appraisal Foundation's Appraiser Qualification Board's Real Property Appraiser Qualification Criteria for a Certified General Real Estate Appraiser.

Above 300 hours must include:

15-Hour National USPAP Course

In-lieu of the 15-Hour National USPAP Course, substitute equivalent or a similar offering.

IRWA Coursework Checklist: *Complete the following and attach copy of course completion certificates.*

401, The Appraisal of Partial Acquisitions, 40 credit units

Or

401C, The Appraisal of Partial Acquisitions (Canadian), 40 credit units

Or

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PATH 3 FORMAL EDUCATION AND COURSEWORK CHECKLISTS

IRWA Ethics Checklist: *Attach a copy of course completion certificate.*

Choose one:

- 102, Elevating Your Ethical Awareness, 8 credit units
- 103, Ethics and the Right of Way Profession, 8 credit units
- 104, Standards of Practice for the Right of Way Professional, 8 credit units

Capstone Exam Checklist:

Complete the following and attach a copy of your "Pass letter."

- Appraisal Capstone Exam Date of Pass letter: ____/____/____



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**CODE OF ETHICS
APPLICANT SIGNATURE PAGE**

Answer the following questions:

Have you ever been convicted of fraud, misrepresentation,
Or misappropriation of funds or property? Yes No
If yes, attach a detailed explanation.

Have you ever been subject to disciplinary action by any
Professional organization? Yes No
If yes, attach a detailed explanation.

By signing below, I agree to abide by the IRWA Code of Ethics and to be subjected to disciplinary action as adopted by the International Executive Committee (IEC). All the information provided by me is complete and correct to the best of my knowledge and belief. If I made or at any time make statements with knowledge of the false statements, I understand that it shall be cause for denial or revocation of the certification.

Applicant's Printed Name: _____

Applicant's Signature: _____

Date: ____ / ____ / ____ (MM/DD/YYYY)



**R/W-AC, APPRAISAL CROSS CERTIFICATION
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AGREEMENT PAGE

Applicant's Name: _____

In completing this application, I hereby consent to the following terms:

1. I subscribe to the aims and purposes and agree to abide by the Code of Ethics of the IRWA.
2. I hereby irrevocably waive any claim or right of action at law or in equity that I might have any time hereafter against the IRWA, its governing officers, committee members, staff members or any other officials, either as a group or as individuals, for any official act in connection with the business of the Certification Program and particularly as to their acts in admitting or failing to admit me to Certification status; or, disciplining me for any violation of the IRWA's Code of Ethics or any inaccuracy in the information provided in my application.
3. I hereby authorize the IRWA to verify all information contained herein and further to make all investigations in any manner it deems necessary.
4. I hereby certify that all statements made in this application are true to the best of my knowledge, and I agree and understand that misstatements of any material facts herein may cause forfeiture of all rights to Certification status with no refund of my application fee(s).
5. Attached hereto is my application fee (payable to IRWA).
6. If I become certified by the IRWA, I agree that I will comply with any future requirements the International Executive Committee of the IRWA, or its appointed oversight committee, decides are appropriate for retaining my registration as a Certified Right of Way Professional of the IRWA.

Applicant's Signature: _____ Date: ____/____/____

For local Chapter PDC Chair Use Only PDC

Chair Name: _____

Mailing Address: _____ Chapter #: _____

City, State/Province: _____

Zip/Postal Code: _____ Phone: _____

Email: _____ Date: ____/____/____

PDC Chair Signature: _____