

APPLICATION FOR REVALUATION CERTIFICATION EXAMINATION



CONNECTICUT
Policy and Management

Applicant Information	
Name of Applicant:	Telephone Number:
Address:	City/Town: State: ZIP:
Address:(Where Exam results should be sent, if different from above)	City/Town State: ZIP:
Email Address:	
Sponsoring Company:	Company Contact:
Company Address:	Contact Email Address:

Qualifying Experience

Pursuant to Section 12-2b-8 of the Regulations of CT State Agencies, an individual applying for a certification must have experience in the field of assessing, revaluation or appraisal of Residential Real Estate or Personal Property for at least two (2) years, or the valuation of Commercial and Industrial Real Estate or Revaluation Supervision for at least three (3) years. Starting with your current employer, list your complete employment history for the past five (5) years.

Company Name Address & Telephone	Position Held	Description of Duties	Dates		Time Attributed to Valuation
			From M/Y	To M/Y	

(attach resume if necessary)

Examination Selection

Please indicate below the examination(s), and the time slot selected, for each examination selected. Applicants may only complete only one examination per session.

Examination	Morning Session (x)	Afternoon Session (x)
Land/Residential		
Commercial/Industrial		
Personal Property		
Supervisor*		

*In order to apply to take the Supervisor Examination, an applicant must possess both the Residential and Commercial Designations.

I certify that the above information I have provided is true and accurate, and I am aware that certification may be suspended for misrepresentation, false or fraudulent information.

Signature

Printed Name

Date

**Submit completed application between
February 1, 2016 and not later than March 2, 2026 to**

OPMIGPP@ct.gov