

OKLAHOMA REAL ESTATE APPRAISER BOARD APPRAISER GRIEVANCE FORM

To: Oklahoma Real Estate Appraiser Board
Oklahoma Insurance Department

400 NE 50th St., Oklahoma City, Oklahoma 73112-1816

Telephone:_ From: City & State: Address: Name of appraiser:_ Address: Firm: City & State:_ Type of Appraisal (Residential, Agricultural, Commercial, etc.): Location of Property: Date of Appraisal:_ Names and addresses of other involved parties: **GRIEVANCE** Please give as detailed information as possible including dates, and explain what solution you feel is correct. Attach copies of your appraisal report(s), exhibits, documents and any other correspondence relating to the complaint. _____, state that the information supplied by me is true and correct to the best of my knowledge. Signature of person making grievance Date **OREAB USE ONLY** Grievance Number: Date Entered: