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KENTUCKY BOARD OF AUCTIONEERS

500 Mero Street, 2NE09 Frankfort, Kentucky 40601 (502) 782-0722 http://auctioneers.ky.gov

LICENSE RENEWAL FORM

All Kentucky auction licenses expire on June 30th of each year. To renew using this Form, you must certify that you are unable to renew online. To renew online, visit https://auctioneers.ky.gov/Pages/License-Renewal.aspx.

LICENSEE INFORMATION	
Print Name	License No.
(1) If you are a reciprocal licensee, you must attach a copy of your current home state license to this Form.	
(2) Since your last renewal:	
(a) Have you been denied any type of professional license in Kentucky or any other state? Yes No If yes, attach documentation explaining the circumstances of the denial.	
(b) Has disciplinary action been taken against any professional license you hold or have held in Kentucky or any other state? Yes No If yes, attach documentation explaining the circumstances of the discipline.	
(c) Has a judgment involving personal property or real estate been obtained against you or any partner or shareholder of your firm? Yes No If yes, attach documentation explaining the judgment.	
(d) Have you been convicted of any state or federal felony crime? \square Yes \square No If yes, attach a copy of the conviction.	
RENEWAL FEE(S)	
Each application must be submitted with the Total Renewal Fee paid by Check or Money Order made out to the Kentucky State Treasurer . The total Fee(s) you owe will be determined by your base license renewal fee PLUS any penalties or additional Fee(s) as indicated below. Calculate your Total Renewal Fee by following the instructions below. • Unless otherwise indicated below, your base license renewal fee is \$125.00 . • Base renewal fees for reciprocal licensees from <u>AL, LA, NC, and SC are \$150.00</u> , and from <u>MS are \$195.00</u> .	
Write your base license renewal fee in box A.	A.
If your license IS in Escrow, write "0" in box B. If your license is NOT in Escrow, write "30" in box B.	В.
If you did not complete your Continuing Education by May 31st of this year, wr box C. If you did complete your Continuing Education by May 31st, write "0."	ite "300" in C.
If it will be post-marked ON OR BEFORE June 30 th , write "0." If this Form and your payment will be post-marked AFTER June 30 th write "125" in box D. D.	
Add the amounts in boxes A-D and write the total in box E. This is your Total Re	enewal Fee. E. \$
CERTIFICATION AND AUTHORIZATION	
I,	
authorized agents, as well as to the Board for use of such information.	
Signature of Licensee	Date
X	

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