



**STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION  
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION  
BOARD OF LICENSING OF AUCTIONEERS  
EXAM APPLICATION**

APPLICANT INFORMATION (please print)			
FULL LEGAL NAME	<i>FIRST</i>	<i>MIDDLE INITIAL</i>	<i>LAST</i>
ANY OTHER NAMES EVER USED:			
DATE OF BIRTH	<i>mm / dd / yyyy</i>	SOCIAL SECURITY NUMBER	- -
MAILING ADDRESS			
CITY	STATE	ZIP	COUNTY
PHONE # ( )	FAX # ( )		
E-MAIL			
By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief. By submitting this application, I affirm that the Office of Professional and Occupational Regulation will rely upon this information for issuance of my license and that this information is truthful and factual. I also understand that sanctions may be imposed including denial, fines, suspension or revocation of my license if this information is found to be false.			
<b>SIGNATURE</b>		<b>DATE</b>	

Required Exam Application Fee: \$150.00

**Note to Applicants:**

Auctioneer examinations are held approximately every other month at our office in Gardiner, Maine. After reviewing the examination schedule on our website ([www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing)), please indicate the date you wish to take the exam:

Requested Examination Date: \_\_\_\_\_

Please note that examination applications must be received at least two weeks prior to the requested examination date.

**Office Use Only:**

AUC1447 - \$150.00

*Office Use Only:*

Check # \_\_\_\_\_  
 Amount: \_\_\_\_\_  
 Cash # \_\_\_\_\_  
 Lic. # \_\_\_\_\_  
 Issue Date \_\_\_\_\_  
 Exp. Date \_\_\_\_\_

**PAYMENT OPTIONS:**

Make checks payable to "Maine State Treasurer" - If you wish to pay by Mastercard or Visa, fill out the following:

NAME OF CARDHOLDER (please print)	<i>FIRST</i>	<i>MIDDLE INITIAL</i>	<i>LAST</i>
I authorize the Department of Professional and Financial Regulation, Office of Professional and Occupational Regulation to charge my <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD the following amount: \$ _____			
<b>I understand that fees are non-refundable</b>			
Card number:	<i>XXXX-XXXX-XXXX-XXXX</i>	Expiration Date	<i>mm / yyyy</i>
<b>SIGNATURE</b>		<b>DATE</b>	

# BOARD OF LICENSING OF AUCTIONEERS INSTRUCTIONS

## EXAM PROCESS

1. You must submit the one page exam application (page 1) and nonrefundable fee at least two weeks before the exam date.
2. You will receive an exam admission letter approximately two weeks before the exam.
3. The exam is administered at the office of Professional and Occupational Regulation located at 76 Northern Avenue, Gardiner, Maine.
4. Your exam results will be mailed to you within one week after the exam date. Exam results will not be released over the telephone. You must score 80% or better to pass the exam.
5. After passing the exam, you must apply for an Auctioneer license within 90 days of the exam date by submitting the 2 page license application (pages 3-4).

## Examination Content and Format:

The Auctioneer examination consists of 50 multiple-choice and true/false questions.

The examination questions are based on Maine Law and Board rules:

32 M.R.S.A., c. 5-B (Board of Licensure of Auctioneers)  
10 M.R.S.A. Chapter 901 (Applicable sections are §8003 (5-A) *through* §8009);  
11 M.R.S.A. §2 –328 (The Uniform Commercial Code – “Sale by Auction”) and,  
Rules of the Board of Licensure of Auctioneers (Chapters 10, 30, 40 & 50).

## QUESTIONS

If you have questions about the exam or the licensing process, please contact Deborah Fales ([deborah.a.fales@maine.gov](mailto:deborah.a.fales@maine.gov)). You may also reach her at (207) 624-8521.



**STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION  
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION  
BOARD OF LICENSING OF AUCTIONEERS  
LICENSE APPLICATION**

<b>APPLICANT INFORMATION</b> (please print)			
FULL LEGAL NAME	<i>FIRST</i>	<i>MIDDLE INITIAL</i>	<i>LAST</i>
ANY OTHER NAMES EVER USED:			
DATE OF BIRTH	<i>mm / dd / yyyy</i>	SOCIAL SECURITY NUMBER	- -
MAILING ADDRESS			
CITY	STATE	ZIP	COUNTY
PHONE # ( )	FAX # ( )	E-MAIL	
<b>CRIMINAL BACKGROUND DISCLOSURE</b>			
<i>NOTE: Failure to disclose criminal convictions may result in denial, fines, suspension and/or revocation of a license.</i>			
<b>1. Have you ever been convicted by any court of any crime? (circle one)    NO    YES</b>			
If yes, enclose a detailed description of what happened (including dates) and a copy of the court judgment.			
<b>2. Has any jurisdiction taken disciplinary action against any professional license you hold or have held, or denied your application for licensure? (circle one)    NO    YES</b>			
If yes, enclose a detailed explanation and copies of all documents.			
By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief. By submitting this application, I affirm that the Office of Professional and Occupational Regulation will rely upon this information for issuance of my license and that this information is truthful and factual. I also understand that sanctions may be imposed including denial, fines, suspension or revocation of my license if this information is found to be false.			
<b>SIGNATURE</b>	<b>DATE</b>		

**Required License Application Fee: \$271.00** (includes criminal records check fee)  
**Submit license application only after you pass the Auctioneer exam.**

**Note to Applicants:**

Along with this application, you must include:

- \$10,000 surety bond, written to expire no sooner than March 31 of next year.
- Certificate of license history from any other jurisdiction in which you hold or have ever held an auctioneer's license.

Office Use Only:  
**AUC**  
1421 - \$200.00  
1446 - \$50.00  
2619 - \$21.00

Office Use Only:

Check # \_\_\_\_\_  
Amount: \_\_\_\_\_  
Cash # \_\_\_\_\_  
Lic. # \_\_\_\_\_  
Issue Date \_\_\_\_\_  
Exp. Date \_\_\_\_\_

<b>PAYMENT OPTIONS:</b>			
Make checks payable to "Maine State Treasurer" - If you wish to pay by Mastercard or Visa, fill out the following:			
NAME OF CARDHOLDER (please print)	<i>FIRST</i>	<i>MIDDLE INITIAL</i>	<i>LAST</i>
I authorize the Department of Professional and Financial Regulation, Office of Professional and Occupational Regulation to charge my    VISA    MASTERCARD    the following amount: \$ _____			
<b>I understand that fees are non-refundable</b>			
Card number:	<i>XXXX-XXXX-XXXX-XXXX</i>	Expiration Date	<i>mm / yyyy</i>
<b>SIGNATURE</b>	<b>DATE</b>		

## LICENSE HISTORY

**Have you ever held a Maine auctioneer's license?** NO YES \*\*

**Do you now hold OR have you ever held an auctioneer's license in any other state or jurisdiction?** NO YES \*\*

Include with this application a certificate of good standing from each state and/or jurisdiction.

**Has any jurisdiction taken disciplinary action against any professional license you hold or have held, or denied your application for licensure?** NO YES \*\*

** If yes to any question above, complete the following information:	1	2	3	4	5
Type of license held					
Licensing State					
License Expiration Date					
Date Suspended/Revoked					

**ARE YOU A MAINE RESIDENT?** NO YES

### Frequently Asked Questions:

- **Where do I send my application?** Our mailing address is 35 State House Station, Augusta, Maine 04333-0035
- **Where are you located?** 76 Northern Avenue, Gardiner, Maine.
- **What hours are you open?** 8:00 AM to 5:00 PM weekdays
- **Can I come to Gardiner to drop off my application?** Yes. You will not leave with a license, though.
- **How long does it take to process an application?** You can check our website: [www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing). Your license will show up as PENDING at first; as soon as your status is ACTIVE you are authorized to practice.
- **How far back do I go answering the criminal question?** Any conviction, ever.
- **I can't find your examination schedule on the website. Can I call you and ask?** Yes. Call Deborah Fales at (207) 624-8521.

### NOTICES

**BACKGROUND CHECK:** Pursuant to 5 M.R.S.A. §5301 - 5303, the State of Maine is granted the authority to take into consideration an applicant's criminal history record. The Office of Professional and Occupational Regulation requires a criminal history records check as part of the application process for all applicants.

**PUBLIC RECORD:** This application is a public record for purposes of the Maine Freedom of Access Law (1 MRSA §401 et seq). Public records must be made available to any person upon request. This application for licensure is a public record and information supplied as part of the application (other than social security number and credit card information) is public information. Other licensing records to which this information may later be transferred will also be considered public records. Names, license numbers and mailing addresses listed on or submitted as part of this application will be available to the public and may be posted on our website.

**SOCIAL SECURITY NUMBER:** The following statement is made pursuant to the Privacy Act of 1974. Disclosure of your Social Security Number is mandatory. Solicitation of your Social Security Number is solely for tax administration purposes, pursuant to 36 MRSA §175 as authorized by the Tax Reform Act of 1975 (42 USC §405(c)(2)(C)(i)). Your Social Security Number will be disclosed to the State Tax Assessor or an authorized agent for use in determining filing obligations and tax liability pursuant to Title 36 of the Maine Revised Statutes. No further use will be made of your Social Security Number and it shall be treated as confidential tax information pursuant to 36 MRSA §191.

#### **Before you seal the envelope, did you:**

- Complete every item on the application (incomplete applications may be returned)
- Answer the criminal background disclosure questions
- Sign and date your application
- Include correct amount (payable to Maine State Treasurer) or credit card information (plus signature)
- Include any required transcripts or exam results
- Make a copy of your application to keep for your records
- DO NOT SEND CASH.

STATE OF MAINE DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
OFFICE OF PROFESSIONAL & OCCUPATIONAL REGULATION

**Mailing Address:** 35 State House Station, Augusta, Maine 04333 **Courier/Delivery address:** 76 Northern Avenue, Gardiner, Maine 04345  
Phone: (207) 624-8521 TTY users call Maine Relay 711 Fax: (207) 624-8637 [www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing)