



Mississippi Real Estate Appraisal Board

ADMINISTRATOR
E. C. NEELLY, IV

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COPY OF BACKGROUND CHECK REQUEST

- **Must show valid ID...make copy of ID**
- **We cannot mail, fax or email the background check.**
- **You must be here in person to request and receive it.**
- **It will not be given to anyone other than the person whose background check it is.**
- **Must be approved and signed by the Administrator.**

NAME: _____ **MAB LICENSE #** _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____

SIGNATURE: _____ **DATE:** _____

E. C. NEELLY, IV – Administrator

Subscribed and sworn to before me in my own presence, this _____ day of _____, _____

a Notary Public in and for the County of _____ State of _____

My Commission expires _____ 20____

(signature) Notary Public