



South Carolina Department of Labor, Licensing and Regulation

South Carolina Auctioneers' Commission

110 Centerview Dr. • Columbia • SC • 29210

P.O. Box 11329 • Columbia • SC 29211-1329

Phone: 803-896-4670 • Contact.Auctioneers@llr.sc.gov • Fax: 803-896-4554

www.llr.sc.gov/POL/Auctioneers/



APPRENTICE AUCTIONEER APPLICATION REQUIREMENTS AND INSTRUCTIONS – ELECTRONIC APP

Complete applications for examination must be received **two weeks** before the examination date.

Examination dates can be found at our website: <http://llr.state.sc.us/POL/Auctioneers/index.asp?file=licensure.htm>

You must read and understand the South Carolina Auctioneer's Law and the Rules and Regulations of the Commission before your application is processed. They can be found at this link:

<http://llronline.com/POL/Auctioneers/index.asp?file=laws.htm>

Include with your application:

- Submit payment in the amount of \$235 (\$150 license fee, \$50 recovery fund fee, \$25 examination fee and \$10 credit report fee) via credit card or check.
All fees are non-refundable. A returned check fee of up to \$30, or an amount specified by law, may be assessed on all returned funds.
- Upload a copy of your valid Driver's License, State Issued ID, Passport or Military ID
- Upload a copy of your Social Security Card
- Upload a notarized verification of lawful presence
- Upload a notarized escrow/trust account certification affidavit
- Upload a Notarized Signature Photo Affidavit
- Upload Supervising Auctioneer's Endorsement of Apprentice Auctioneer form
- Upload official statewide background check from your state(s) of residence covering the past 5 years (South Carolina residents must use www.sled.sc.gov)

You can submit these pages by either attaching them to the online application under the "Uploads" section OR by mailing them to the Board.

Please note that any illegible documents will not be accepted. If your upload is found to be illegible you will be asked to mail in the supporting document.

NOTE: Your application is good for one (1) year from the date of receipt. If all required information is not received within this period; you must begin the application process from the beginning. This includes, but is not limited to, all fees, transcripts, license verifications, etc.

After submitting your application, allow 24 hours to post. After it has posted, you may check the status at:

<https://eservice.llr.sc.gov/SecurePortal/Login.aspx?ReturnUrl=%2fSecurePortal%2fIndex.aspx>



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Escrow Account Verification for Auctioneers

Pursuant to S.C. Code, Section 40-6-155, a licensee must maintain and deposit funds in a trust/escrow account with an insured bank or savings and loan association if auction proceeds are held by the licensee more than three (3) business days. The Commission or its designated representative may examine the account for investigation or inspection purposes. Licensees must notify the Commission immediately by certified mail, return receipt requested, of any account changes. The following authorization and account information is required for licensure and renewal purposes. Complete the appropriate sections below which apply to your business policy.

This form must be properly notarized and sealed.

To be exempt from the escrow account requirement, I hereby certify that auction proceeds are paid to owners/consignors within three (3) business days.

Applicant or Licensee Signature: _____ License No. _____
(If applicant, indicate "pending")

I authorize the Auctioneers' Commission or its designated representative to examine any information regarding the escrow account herein indicated.

Applicant or Licensee Signature: _____ License No. _____
(If applicant, indicate "pending")

Account Holder's Name: _____ Account No. _____

Bank Name: _____ Bank Phone: _____

Bank Address: _____

I hereby certify I am employed by another licensed auctioneer or licensed auction firm who maintains an active escrow account used solely for the purpose of holding funds of others in relation to auctions.

Account Holder's Name: _____ Account No. _____

Bank Name: _____ Bank Phone: _____

Bank Address: _____

Applicant or Licensee Signature: _____ License No. _____
(If applicant, indicate "pending")

Principal Employer Signature: _____ License No. _____
(If applicant, indicate "pending")

Applicant's Signature: _____ Date: _____

Sworn to and subscribed me this _____ day of _____, 20 _____.

Notary Signature: _____ (SEAL)

Notary Print Name: _____

Notary Public for the State of: _____

Commission Expiration Date: _____



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**SUPERVISING AUCTIONEER'S ENDORSEMENT
OF APPRENTICE AUCTIONEER**

This is to certify that the applicant, _____, will, when properly licensed, be associated with or engaged by me in the capacity of an apprentice auctioneer, that I will exercise proper supervision over and assume responsibility for his/her acts as an apprentice auctioneer while associated with me, that to the best of my knowledge he/she is a person of honesty, truthfulness and integrity, and that I will personally appear before the Commission in connection with this application if requested to do so.

Supervising Auctioneer's Signature

Date

Print Name of Supervising Auctioneer

License Number

Business Name: _____

Business Address: _____
Street, P.O. Box, or Route City State Zip

Mailing Address: _____
Street, P.O. Box, or Route City State Zip



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**NOTARIZED SIGNATURE / PASSPORT PHOTO AFFIDAVIT
THIS FORM IS FOR USE WITH ELECTRONIC APPLICATIONS ONLY**

I, _____, am the person described and identified and the person named in all documents presented in support of this application. I certify that I have never been convicted of violating any Federal, State, Municipal or other law, statute or ordinance, other than as disclosed as required within this application.

I have carefully read the questions within this application and have answered them completely, without reservations of any kind, and I declare that all statements made by me herein are true and correct to the best of my knowledge and belief.

Should I furnish any false, incomplete, or misleading information in this application, I hereby agree that such act shall constitute the cause for denial or revocation of my license in South Carolina.

Applicant's Signature: _____ Date: _____

Sworn to and subscribed me this _____ day of _____, 20 ____.

Notary Signature: _____

Print Notary Name: _____

Notary Public for the State of: _____

Commission Expiration Date: _____

{Seal}

**Tape a recent 2 x 2
Passport Photo
(Less than 6 months old)**

You can submit this page by either attaching it to the online application under the "Uploads" section OR by mailing this page to the Board.

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STATE OF SOUTH CAROLINA
DEPARTMENT OF LABOR, LICENSING AND REGULATION
VERIFICATION OF LAWFUL PRESENCE IN THE UNITED STATES
AFFIDAVIT OF ELIGIBILITY



Pursuant to Section 8-29-10, *et seq.* of the South Carolina Code of Laws (1976, as amended), the Department of Labor, Licensing and Regulation must verify that any person who applies for a South Carolina license is lawfully present in the United States. Complete and sign this affidavit of eligibility. The information provided is subject to verification.

Section A: LAWFUL PRESENCE in the United States.

The undersigned _____, of _____
(Print clearly First, Middle, and Last name) (Home Address, City, State, and Zip Code)
being first duly sworn deposes and states as follows:

Check only one box:

1. I am a United States citizen; or

2. I am a Legal Permanent Resident of the United States eighteen years of age or older; or

3. I am a Qualified Alien or non-immigrant under the Federal Immigration and Nationality Act, Public Law 82-414, eighteen years of age or older, and lawfully present in the United States.

4. Other: _____ Please submit any documentation that supports this status.

Date of Birth: _____

Alien Number: _____ I-94 Number: _____

(If you checked number 2, 3, or 4 you must attach a copy of your immigration documents. See instruction sheet for a list of accepted immigration documents.)

Section B: ATTESTATION.

I understand that in accordance with section 8-29-10 of the South Carolina Code of Laws, a person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall, in addition to other sanctions imposed by this State or the United States, be guilty of a felony, and upon conviction must be fined and/or imprisoned for not more than 5 years (or both).

I understand that the representations made in this Affidavit shall apply through any license(s) or renewals issued, and that I shall have an affirmative duty to immediately advise the Department of Labor, Licensing and Regulation of any change of my immigration or citizenship status.

I swear and attest the information contained herein is true and correct to the best of my knowledge. I understand that under South Carolina law, providing false information is grounds for denial, suspension, or revocation of a license, certificate, registration or permit.

Signature of Affiant

SWORN to before me this _____ day of _____, 20____

Notary Signature

Print Name

Notary Public for _____

My Commission Expires: _____

INSTRUCTION SHEET FOR COMPLETING AFFIDAVIT OF ELIGIBILITY

CHECK box 1:

If you are a United States Citizen by birth or naturalization

CHECK box 2:

If you are a Legal Permanent Resident and you are not a U.S. Citizen, but are residing in the U.S. under legally recognized and lawfully recorded permanent residence as an immigrant.

PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.

CHECK box 3:

If you are a Qualified Alien. You are a Qualified Alien if you are:

An alien who is lawfully admitted for residence under the INA.

An alien who is granted asylum under Section 208 of the INA.

A refugee who is admitted to the United States under Section 207 of the INA.

An alien who is paroled into the United States under Section 212(d)(5) of the INA for a period of at least 1 year.

An alien whose deportation is being withheld under Section 243(h) of the INA (as in effect prior to April 1, 1997) or whose removal has been withheld under Section 241(b)(3).

An alien who is granted conditional entry pursuant to Section 203(a)(7) of the INA as in effect prior to April 1, 1980.

An alien who is a Cuban/Haitian Entrant as defined by Section 501(e) of the Refugee Education Assistance Act of 1980.

An alien who has been battered or subjected to extreme cruelty, or whose child or parent has been battered or subject to extreme cruelty.

PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.

ACCEPTED IMMIGRATION DOCUMENTS:

Unexpired Reentry Permit (I-327)

Permanent Resident Card or Alien Registration Receipt Card With Photograph (I-551)

Unexpired Refugee Travel Document (I-571)

Unexpired Employment Authorization Card Which Contains a Photograph (I-766)

Machine Readable Immigrant Visa (with Temporary I-551 Language)

Temporary I-551 Stamp (on passport or I-94)

I-94 (Arrival/Departure Record) in Unexpired Foreign Passport

I-20 (Certificate of Eligibility for Nonimmigrant, F-1, Student Status)

DS2019 (Certificate of Eligibility for Exchange Visitor, J-1, Status)