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VERIFICATION STATEMENT OF KEY PERSON FOR APPRAISAL MANAGEMENT COMPANY

I VERIFY THAT THIS FORM IS IN THE ORIGINAL FORMAT AS SUPPLIED BY THE DEPARTMENT OF STATE AND HAS NOT BEEN ALTERED OR OTHERWISE MODIFIED IN ANY WAY. I AM AWARE OF THE CRIMINAL PENALTIES FOR TAMPERING WITH PUBLIC RECORDS OR INFORMATION PURSUANT TO 18 Pa. C.S. §4911.

I VERIFY THAT THE STATEMENTS IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. I UNDERSTAND THAT ANY FALSE STATEMENT MADE IS SUBJECT TO THE PENALTIES OF 18 Pa. C.S. §4904, RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES AND MAY RESULT IN DENIAL, SUSPENSION OR REVOCATION OF THE REGISTRATION OF THE APPRAISAL MANAGEMENT COMPANY AND ACTION TO RESTRICT OR PROHIBIT MY STATUS AS A KEY PERSON WITH THE APPRAISAL MANAGEMENT COMPANY.

APPLICANT'S SIGNATURE _____ DATE _____