



APPRAISAL MANAGEMENT COMPANY (AMC) CHANGE OF APPRAISER CONTACT INFORMATION

FEES	RECEIPT NUMBER	AMOUNT	MONEY TYPE	DATE RECEIVED
CHANGE FEE		\$20.00		

DO NOT WRITE ABOVE THIS LINE

**ALL INFORMATION MUST BE TYPED OR PRINTED IN INK.
MAKE CHECKS OR MONEY ORDERS PAYABLE TO TALCB. FEES ARE NON-REFUNDABLE.**

Full Legal Name of AMC (as it appears on registration)

TALCB Registration No.

ADDITION OF APPRAISER CONTACT

I hereby request that the appraiser named below be added as a new appraiser contact for the AMC.

Name

Certification/License No.

State

Expiration Date

Place of Business Address (may be a fixed street address OR a Post Office Box)

Apt. or Suite

City

State

Zip Code

Phone Number

Email Address

TERMINATION OF APPRAISER CONTACT

I hereby request that the appraiser named below be removed as an appraiser contact for the AMC.

Name

Certification/License No.

State

Expiration Date

Email Address

I certify that the information provided on this form is true and correct.

Signature of Person with Authority to Sign on Behalf of AMC

Date Signed

Typed or Printed Name

Title

PRIVACY NOTICE

In accordance with Chapter 559, Government Code, the following notice about certain information laws and practices is given.

- (1) With few exceptions, an individual is entitled on request to be informed about the information that a state governmental body collects about the individual.
- (2) Under Sections 552.021 and 552.023 of the Governmental Code, the individual is entitled to receive and review the information.
- (3) Under Section 559.004 of the Governmental Code, the individual is entitled to have the governmental body correct information about the individual that is incorrect.