

APPRAISER LICENSING & CERTIFICATION BOARD

P.O. Box 12188 • Austin, Texas 78711-2188 • www.talcb.texas.gov

APPRAISAL MANAGEMENT	COMPANY (AMC) CHANGE OF	DESIGNATED IN-STATE	AGENT INFORMATION	
FEES			DATE RECEIVED	
	NO FEE REQUIRED			
	DO NOT WRITE ABOVE	THIS LINE		
	ALL INFORMATION MUST BE TYPE	ED OR PRINTED IN INK.		
Full Legal Name of AMC (as it appears	on registration)	TA	LCB Registration No.	
DESIGNATION OF IN-STATE AG	ENT (for an AMC not domiciled in Texas	for service of process)		
hereby request that the person n	amed below be designated as in-state a	gent for service of process for	the AMC.	
Name				
Place of Business Address (must be a fixed street address, not a Post Office Box)			Apt. or Suite	
City	State Zip Code	Phone Number		
TERMINATION OF IN-STATE AC	GENT (for an AMC not domiciled in Texas	for service of process)		
hereby request that the person n	amed below be removed as in-state age	ent for service of process for th	e AMC.	
Name				
Place of Business Address (must be a	fixed street address, not a Post Office Box)		Apt. or Suite	
City	State Zip Code	Phone Number		
certify that the information pro	ovided on this form is true and correct	:.		
Signature of Person with Authority to Sign on Behalf of AMC		D	Date Signed	
Typed or Printed Name			Title	
	PRIVACY NOTICE			
In accordance with	Chapter 559, Government Code, the following notice	about certain information laws and pra-	ctices 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.