



APPRAISAL MANAGEMENT COMPANY (AMC) REQUEST FOR ACTIVE STATUS

P.O. Box 12188, Austin, Texas 78711-2188

FEES	RECEIPT NUMBER	AMOUNT	MONEY TYPE	DATE RECEIVED
ACTIVE STATUS		\$50.00		

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. _____

IN ORDER TO RETURN TO ACTIVE STATUS, REGISTRANT MUST HAVE A VALID PRIMARY CONTACT AND APPRAISER CONTACT.

Primary Contact Information: (must meet the definition of "controlling person" in Section 1104.003(b)(6) Texas Occupations Code)

The Primary Contact must sign and submit a separate Owner/Primary Contact Background History Form.

Name

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

City

State

Zip Code

Phone Number

Fax Number

E-mail Address

The Primary Contact: (check one)

is a certified appraiser _____
Certification No. _____ State _____ Expiration Date _____

OR

has taken a 15-Hour National USPAP course (submit copy of course completion certificate)

I hereby agree to serve as the primary contact for the AMC named above.

Signature of Person with Authority to Sign on Behalf of AMC

Date Signed

Typed or Printed Name

Title

Appraiser Contact Information: (must be a licensed or certified appraiser)

Name

Certification/License No.

State

Expiration Date

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

City

State

Zip Code

Phone Number

Email Address

CERTIFICATION STATEMENT

All information I have submitted in this form is true and correct. I understand that if I have furnished false or misleading information on this form, the registration may be revoked or other disciplinary action taken.

I understand that my registration is not active until TALCB issues an active registration.

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.**