



**APPRAISAL MANAGEMENT COMPANY (AMC)
OWNER/PRIMARY CONTACT BACKGROUND HISTORY**

REQUIRED FEE \$50

RECEIPT NUMBER

DATE RECEIVED

*No fee required if submitted with original application or renewal

**For use by: (1) any individual or business entity owning more than 10% of AMC
(2) the AMC's primary contact**

Primary contact must be one or more of the following:

- an owner, officer, or director of the AMC
- an individual employed, appointed, or authorized by the AMC to enter into a contractual relationship with other persons for the performance of appraisal management services and to enter into agreements with appraisers for the performance of appraisals
- an individual who possesses, directly or indirectly, the power to direct or cause the direction of the management or policies of the AMC

Name (Individual/Entity)

Certification/License Number (if applicable)

State

Expiration Date

Business Street Address or P.O. Box No.

Apt. or Suite

City

State

Zip Code

Telephone No.

Email address

SSN or TIN No. (for person or entity named)

Note: Section 231.302 of the Texas Family Code REQUIRES all applicants to disclose their Social Security Numbers (SSN) when filing an application. The SSN that is provided will be confidential and is required to enforce Child Support orders. Failure to provide the SSN will prevent a license from being issued and could ultimately lead to termination of the application.

Date of Birth: _____
(if applicable) (mm/dd/yyyy)

Gender: Male Female NA

Ethnic Group: Black/African American White Hispanic Asian
 Other (specify): _____
 Decline to respond NA

I am an owner of agree to serve as the primary contact for: _____
(AMC Name)

TALCB Registration No. (if applicable)

Note: In the following questions "you" refers to the individual or entity as applicable. If this form is being completed in conjunction with an Application for Renewal of Registration and you have previously submitted this Background History Form, the information provided for the questions below may be limited to the time period since the date of your last application for registration or renewal.

1. Have you ever had any professional or occupational license or certification suspended, canceled or revoked; received a reprimand or disciplinary action; surrendered a license or certification pending disciplinary action; or had an application for such denied in Texas or in any other state? Yes No

If "YES" please attach a complete written explanation and appropriate documentation such as final orders, etc.

2. Are any complaints, disciplinary hearings, or investigations pending against any professional or occupational licenses you hold? Yes No
If "YES" please attach a complete written explanation with copies of all orders, notices, disapprovals, investigative reports, and other documentation.
3. (a) Have you ever been convicted of a criminal offense? (Include **ALL** felonies and misdemeanors, including DWI and DUI. You do not have to include traffic tickets.) Yes No
 (b) Have you ever been placed on probation, community supervision, or deferred adjudication? Yes No
 (c) Are there any criminal charges pending against you? Yes No
If the answer to (a), (b), or (c) is YES, submit copies of all indictments, information, judgments, orders and charges, and a written explanation.
4. In the past four (4) years, have you ever had a civil judgment rendered against you, or are there any civil suits pending against you on one of the following grounds: (a) fraud; (b) intentional or knowing misrepresentation; or (c) grossly negligent misrepresentation in the making of real estate appraiser services. Yes No

If "YES" attach copies of all petitions and judgments and a complete written explanation, including whether or not the judgment has been paid.

CERTIFICATION

I certify that I have personally prepared this background history form and all supporting information and documentation, and that all such information given is true, correct, and complete. If so requested by the Texas Appraiser Licensing and Certification Board (the "Board"), I will furnish all additional information or documentation as may be deemed necessary for the verification of the information provided. I authorize and consent to the Board's conducting an investigation of me and the matters addressed herein as it deems necessary. I understand that information revealed in an investigation may be cause for disapproval of the AMC's original or renewal application even though other requirements for registration have been met.

Signature

Date Signed

Typed or Printed Name

Position (if signing on behalf of an entity)

PRIVACY NOTICE

The following notice about certain information, laws, and practices is given in accordance with Chapter 559, Texas Government Code.

- (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 Government Code, the individual is entitled to receive and review the information.**
- (3) Under Section 559.004 of the Government Code, the individual is entitled to have the governmental body correct information about the individual that is incorrect.**