



APPRAISAL MANAGEMENT COMPANY (AMC) CHANGE OF AMC PLACE OF BUSINESS

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

FEES	DATE RECEIVED
NO FEE REQUIRED	
DO NOT WRITE ABOVE THIS LINE	

ALL INFORMATION MUST BE TYPED OR PRINTED IN INK.

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

TALCB Registration No. _____

AMC PLACE OF BUSINESS CURRENTLY ON FILE WITH TALCB

Place of Business Address (must be a fixed street address, not a Post Office Box) _____

Apt. or Suite _____

City _____

State _____

Zip Code _____

Phone Number _____

AMC NEW PLACE OF BUSINESS

Place of Business Address (must be a fixed street address, not a Post Office Box) _____

Apt. or Suite _____

City _____

State _____

Zip Code _____

Phone Number _____

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.