



RENEWAL OF REGISTRATION AS AN APPRAISAL MANAGEMENT COMPANY (AMC)

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

FEES	RECEIPT NUMBER	AMOUNT	MONEY TYPE	DATE RECEIVED
TIMELY RENEWAL		\$3,090 + (\$10.30 x number of panelists)		
EXPIRED 90 DAYS OR LESS		\$4,635 + (\$10.30 x number of panelists)		
EXPIRED MORE THAN 90 DAYS BUT LESS THAN 6 MONTHS		\$6,180 + (\$10.30 x number of panelists)		

DO NOT WRITE ABOVE THIS LINE

ALL INFORMATION MUST BE TYPED OR PRINTED IN INK. MAKE CHECKS OR MONEY ORDERS PAYABLE TO TALCB. PANELIST FEES MUST BE PAID FOR ALL PANELISTS ON YOUR ACCOUNT. YOU MAY REMOVE A PANELIST ONLINE OR ON A TERMINATION OF PANELIST FORM PRIOR TO RENEWAL WITH THE APPROPRIATE FEE. FEES ARE NON-REFUNDABLE.

1. Full Legal Name of AMC:

2. Assumed Business Name or DBA (if any):

3. TALCB Registration Number: _____ **4. Expiration Date:** _____

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

Number, Street and Suite No.

City State Zip Code Phone Number

6. 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

Number, Street and Suite No. City State Zip Code

Phone Number E-mail Address

7. The Primary Contact: (check one)

is a certified appraiser _____
Certification No. State Expiration Date

OR

has taken a 7-Hour National USPAP Update course within two years of AMC renewal
(submit copy of course completion certificate)

8. Owner Information: (for each individual or business entity owning more than 10% of AMC)

Space is provided for two owners. Attach an additional copy of this page if there are more than two owners of more than 10% .

Individual

- Submit a separate Owner/Primary Contact Background History form.

Business Entity

- Submit a separate Owner/Primary Contact Background History form.
- Attach a copy of the business formation documents showing the ownership structure of the business entity.
- If the Business Entity has multiple owners, calculate % ownership for each Business Entity Owner:

*A is the Business Entity's % ownership of the AMC and B is the Business Entity Owner's % ownership of the Business Entity;
If C is > 10%, then the Business Entity Owner must also submit a separate Owner/Primary Contact Background History form.*

Business Entity Owner #1 _____ A: X B: = C:

Business Entity Owner #2 _____ A: X B: = C:

Business Entity Owner #3 _____ A: X B: = C:

_____ % Ownership of AMC

Name

E-mail Address

Phone Number

Individual

- Submit a separate Owner/Primary Contact Background History form.

Business Entity

- Submit a separate Owner/Primary Contact Background History form.
- Attach a copy of the business formation documents showing the ownership structure of the business entity.
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*A is the Business Entity's % ownership of the AMC and B is the Business Entity Owner's % ownership of the Business Entity;
If C is > 10%, then the Business Entity Owner must also submit a separate Owner/Primary Contact Background History form.*

Business Entity Owner #1 _____ A: X B: = C:

Business Entity Owner #2 _____ A: X B: = C:

Business Entity Owner #3 _____ A: X B: = C:

_____ % Ownership of AMC

Name

E-mail Address

Phone Number

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

Name

Certification/License No.

State

Expiration Date

Business Street Address OR P.O. Box No.

City

State

Zip Code

Phone Number

Email Address

10. Additional Controlling Person(s): (must meet the definition of "controlling person" in Section 1104.003(b)(6) Texas Occupations Code)

Name

Business Street Address OR P.O. Box No.

City

State

Zip Code

Email Address

Phone Number

Name

Business Street Address OR P.O. Box No.

City

State

Zip Code

Email Address

Phone Number

- 11.** Since registration or the last renewal, has the AMC (1) had any professional or occupational license or certification suspended, canceled or revoked; (2) voluntarily surrendered any professional or occupational license; (3) received a reprimand, warning letter, or disciplinary action; or (4) had an application for such denied in Texas or any other state? Yes No

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

- 12.** Are there any pending complaints, investigations, or disciplinary hearings against any professional or occupational licenses held by the AMC? Yes No

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

- 13.** Since registration or the last renewal, has the AMC (1) been convicted of or pleaded *nolo contendere* to a criminal offence (Include **ALL** felonies and misdemeanors); (2) been placed on probation, community supervision, or deferred adjudication; or (3) are there any criminal charges pending against the AMC? Yes No

If the answer to (1), (2), or (3) is YES, submit copies of all indictments, information, judgments, orders and charges, and a written explanation.

- 14.** Since registration or the last renewal, has the AMC had a civil judgment rendered against it, or are there any civil suits pending against it? Yes No

If YES, submit a complete written explanation and copies of all petitions and judgments.

<p>15. Has any AMC owner, in whole or in part, directly or indirectly, had an appraiser credential refused, denied, cancelled, surrendered in lieu of revocation, or revoked in any State? If YES, submit a complete written explanation and appropriate documentation such as final orders, etc.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </p> <p>If yes to the above, was the license or certification reinstated? <input type="checkbox"/> Yes <input type="checkbox"/> No </p>
<p>16. Has any AMC controlling person had an appraiser credential refused, denied, cancelled, surrendered in lieu of revocation, or revoked in any State? If YES, submit a complete written explanation and appropriate documentation such as final orders, etc.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </p>
<p>17. Has any person employed by the AMC had an appraiser credential refused, denied, cancelled, surrendered in lieu of revocation, or revoked in any State? If YES, submit a complete written explanation and appropriate documentation such as final orders, etc.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </p>
<p>18. Has the AMC entered into contracts, agreements, or other business relationships for the provision of appraisals or appraisal management services with an entity or person that has had appraiser credential refused, denied, cancelled, surrendered in lieu of revocation, or revoked in any State? If YES, submit a complete written explanation and appropriate documentation such as final orders, etc.</p> <p style="text-align: right;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </p>

IRREVOCABLE CONSENT TO SERVICE OF PROCESS

I do hereby irrevocably make, constitute, and appoint the Executive Director of the Texas Appraiser Licensing and Certification Board and its successors as my agent, for and in the State of Texas, upon whom service in a legal proceeding arising out of my activities as an appraisal management company may be made, if the plaintiff in the action cannot, in the exercise of due diligence, effect personal service on the AMC through the AMC's agent in Texas. Service of process upon the Executive Director shall be deemed valid personal service upon the AMC pursuant to applicable Texas law. I understand that the AMC has a legal duty to keep the Board informed of its current address. I understand that if and when the Executive Director is served with process, the notice will be forwarded to the primary contact at the current address provided on record with the Board. I also understand that if I fail to notify the Board of any changes, I may not receive notice of legal proceeding against the AMC.

If the AMC is not domiciled in Texas, the AMC must list a legally authorized agent to accept service of process in Texas below:

Agent for Service of Process

Business Street Address (must be a fixed street address, not a Post Office Box)

_____ _____ _____ _____

City State Zip Code Phone Number

CERTIFICATION STATEMENT

I certify that I am authorized to sign this form on behalf of the AMC, that I have personally prepared this form and all information is true, complete and correct. If so requested by TALCB, I will furnish all additional information or documentation as may be deemed necessary for the verification of information provided. I authorize and consent to TALCB conducting investigations of any individual or entity owning more than 10% of the AMC and the primary contact. I understand that information revealed in an investigation may be cause for the AMC to be placed on inactive status, suspended or revoked if the owners or primary contact do not qualify under Subchapter C of Texas Occupations Code 1104, even though other requirements for renewal have been met. I acknowledge that any registration may be revoked if I provide false or misleading information to the Board. I further understand that information submitted in conjunction with this renewal may be subject to public disclosure or inspection in accordance with the Public Information Act (Chapter 552, Government Code).

I certify that the AMC has submitted a separate Owner/Primary Contact Background History form for each individual or business entity who owns more than 10% of the AMC. I certify that the AMC has a system in place to ensure compliance with Subchapter D and Section 129E of the Truth in Lending Act (15 U.S.C. Section 1601 et seq.). If the AMC is a corporation, LLC or partnership (entity), I certify that the entity is in compliance with all statutes, rules and regulations required of it to conduct business in the State of Texas. I agree that the Board may send all notices and communications concerning this registration to the e-mail address of the Primary Contact on file with the Board.

I understand that the AMC's registration is not renewed until TALCB reissues my registration.

Signature of Person with Authority to Sign on Behalf of AMC

Date Signed

Typed or Printed Name

Title

Be certain that your renewal application:

- * Is complete - incomplete renewals cannot be processed and will be returned
- * Is signed and dated
- * Is postmarked no later than the expiration date
- * Include original, signed Owner/Primary Contact Background forms for all required individuals and entities
- * Includes copies of required documents for any "YES" answers

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.