IRREVOCABLE UNIFORM CONSENT TO SERVICE OF PROCESS

This is to be completed if the person seeking registration is not a corporation that is domiciled in New Hampshire; the name and contact information for the company's Agent for Service of Process is required.

The undersigned applicant for re	gistration as an appraisal manag	gement company	in New Hampshire
	Print Name of Company		
does hereby irrevocably consent may be commenced against such process authorized by the laws of Professional Licensing & Certificand held in all courts to be as ver the State of New Hampshire.	n applicant in the courts and age of this State on the Executive D cation and that service of such p	encies of this Sta irector of the Ne process upon said	te, by the service of any we Hampshire Office of a Director shall be taken
Name of Agent for Service of Process (Firm or In	n dividual)		
Title			
Mailing Address	City	State	Zip code
Physical Address	City	State	Zip code
Business Tele phone Number			
I,	ame), am authorized to act as an ager	nt for service of pr	ocess in the
State of New Hampshire on behalf			
organized and existing under the law	ws of the State of		(Current resident state)
for purposes of this application b	efore the New Hampshire Joint l	Board to obtain a	n Appraisal Management
Company Registration. The comple	te address within New Hampshire	whereby I, on beh	alf of
	(Name of AMC), may be	served with proce	ess by the New Hampshire
Office of Professional Licensing &	Certification on his/her designee a	s follows:	
Signature of Agent:		Date:	