

TEXAS LAND TITLE ASSOCIATION AGENT/UNDERWRITER MEMBERSHIP APPLICATION



Company Name: _____

Office Address: _____

City: _____ State: _____ ZIP: _____

County(ies) Where Licensed: _____

Main Phone: _____ Website: _____

Email for General Inquiries: _____

MAIN/ PRIMARY CONTACT

Name: _____

Email: _____

Job Title: _____

DUES CONTACT

if different than main contact

Name: _____

Email: _____

Job Title: _____

DIRECTORY CONTACT

if different than main contact

Name: _____

Email: _____

Job Title: _____

If a member of TLTA recruited your company for membership, please provide their name and company:

AGENTS ONLY:

If a successor to another company, please give name(s) and date(s) founded:

Please list the title insurance underwriters you represent as an agent:

You will be notified of your full membership following approval by the TLTA Board of Directors but you may begin enjoying the benefits of TLTA Agent/Underwriter Membership once your application has been received and processed. Membership dues are based on revenue as reported on the latest available TDI statistical report. Contact the TLTA office at 512.472.6593 or email membership@tltta.com for more detailed information.

Applicant certifies to the association that the information contained herein is true to the best of his/her knowledge and belief.

Name: _____ Title: _____

Signature: _____ Date: _____