



Settlement Services

AMCSS CALIFORNIA PRIVACY REQUEST

Welcome! Please complete this form and mail your request and we will review.

- I am submitting this request on behalf of:
 - Myself
 - My Household
 - Authorized Agent
- I am (a) (an)
 - Consumer
 - Employee
 - Prospective Employee
 - Other
- Select the right you wish to exercise:
 - Access My Information
 - Delete My Information

Data Subject Information:

- First Name
- Last Name
- Address
- City
- State
- Zip Code

Please mail your request to:

AMC Settlement Services
345 Rouser Road
Building 5, Suite 600
Coraopolis, PA 15108
Attention: Compliance Officer