



AUTHORIZATION TO RELEASE INFORMATION

I hereby authorize _____ of _____ (whose phone number is _____ and fax number is _____) and/or any designated agent, assistant, Title Company or its agents to verify any and all information pertaining to the mortgage or property detailed below and any additional financial information pertaining to this property including home owner's association, taxes, liens and any other encumbrances. This notice will also serve to freeze the balance of any line of credit or home equity line at its current balance with no further access to this line.

I/We, _____ hereby release _____ (lender/lenders), its affiliates, employees, agents, and directors from any claims that might arise in connection with this authorization. This authorization shall remain in effect until revoked in writing

It is understood a photocopy or fax of this form will also serve as authorization.

PROPERTY _____

Property Address _____ City _____ State _____ Zip _____

1st MORTGAGE _____

Mortgage Company _____ Account Number _____
Phone Number _____ Fax Number _____
Address _____ City _____ State _____ Zip _____
Loss Mitigation Contact _____ Direct Phone if Available _____

2nd MORTGAGE _____

Second Mortgage Company _____ Account Number _____
Phone Number _____ Fax Number _____
Address _____ City _____ State _____ Zip _____
Loss Mitigation Contact _____ Direct Phone if Available _____

ASSOCIATION (IF ANY) _____

Account Number _____ Management Company _____
Phone Number _____ Fax Number _____

AUTHORIZED BY _____

Borrower Signature _____ Social Security Number _____ Date of Birth _____
Printed Name _____ Today's Date _____
Co-Borrower Signature _____ Social Security Number _____ Date of Birth _____
Printed Name _____ Today's Date _____

Form A