# Third Party Authorization Form

NOTE: This page must be completed if you are giving your loan servicer permission to talk about your loan or line of credit with anyone other than the person(s) listed on the note or credit agreement.

- This third-party authorization allows you, the borrower(s), to authorize the third party designated below to discuss, assist with, or if applicable, negotiate a workout arrangement regarding your loan or line of credit. This includes retention/liquidation options.
- Without this properly executed permission, we will only release information to those persons who appear on the actual Note or credit agreement.
- It is your responsibility to designate the person(s)/companies that have your permission and the timeframe or specific circumstances involved.
- The information contained in this document will be entered in our processing system and the document will be retained with the file and imaged. We recommend you keep a copy for your records.
- Please note that those persons receiving authorization to speak with our representatives can only receive information and are not permitted to make changes to the account.

## Authorization to Release Information:

I/We hereby authorize my loan servicer to release to those persons/companies shown below all information they may require for the purpose of discussing my loan, credit, retention option, transfer, sale and/or foreclosure of the property, including public and non-public information about my finances and my loan or line of credit.

| | | |
|---|---|---|
| _____ | _____ | _____ |
| Loan Number | Property Address | City, State, Zip Code |
| _____ | _____ | _____ |
| Borrower Print Name | Borrower Signature | Date |
| _____ | _____ | _____ |
| Co-Borrower Print Name | Co-Borrower Signature | Date |

## Permission is granted to: (check the appropriate box and list company and/or individual's name and contact information below)

| | | |
|---|---|---|
| ☐ Spouse/Partner | ☐ Housing Counseling Agency | ☐ Realtor/Realty Company |
| ☐ Attorney's Office | ☐ Third Party Negotiator | ☐ Other: _____ |

| | | |
|---|---|---|
| _____ | _____ | |
| Company Name | Individual Name(s) | |
| _____ | _____ | _____ |
| Mailing Address | Email Address | Phone Number |
| | _____ | _____ |
| If applicable: | State License #/Issuing State | HUD HCS# |

## Timeframe permission granted:

☐ Life of Loan/Line of Credit or ☐ For the specific time of: (MM/YYYY to MM/YYYY) _____

*Important: If you do not designate a specific time frame above, the authorization will automatically expire one year from the date signed.*