

AUTHORIZATION TO DISCLOSE INFORMATION

То:		
Date:		
Mortgage Number:		
Borrower Name(s):		
Property Address:		
s representatives to disclose, d		ually and collectively "Borrower" or "I"), hereby authorize RFA and any of est public and confidential personal information related to the mortgage ees.
UTHORIZED THIR	D PARTY	
Name:		
Relationship to Borrower:		
Address:		
Telephone:		
Email Address:		
oes with such information.		rd Party and also has no responsibility or liability for what a Third Party s named on the mortgage and until RFA receives a written revocation
understand and agree w	rith the terms of this third-pa	arty authorization:
Sorrower (print name)		Borrower (print name)
ignature		Signature
Date (DD/MM/YYYY)		Date (DD/MM/YYYY)



AUTHORIZATION TO DISCLOSE INFORMATION

Borrower (print name)	Borrower (print name)	
	,	
Signature	Signature	
Date (DD/MM/YYYY)		