**Borrower Authorization to Release**

**Information or Negotiate Debts To Third Party**

This Authorization is dated the day of , 20

Borrower:

Borrower:

Account No.:

Property Address:

Lender Information:

The undersigned hereby authorize you to release any and all information regarding the above referenced loan/debt to and/or their agents/assigns. This form may be duplicated in blank and or sent by fax. This authorization is a continuation authorization for said persons to receive information about my loan or debts, including payment coupons or booklets and any other notices normally sent to me regarding the above named loan/debt. This document also is authorization for the above named person to negotiate on our behalf debt relief from any vendor, debt holder, creditor or mortgage company/bank.

 SSN:

Borrower

 DOB:

Print Name

 SSN:

Borrower

 DOB:

Print Name