

BORROWER AUTHORIZATION

PURPOSE: This Borrower Authorization form will a representative to share information about your m	
LENDER:	
LOAN#:	
BORROWER(S):	
PROPERTY ADDRESS:	
· · ·	esiding at the PROPERTY ADDRESS above, in the County of named LENDER to release, furnish, provide, exchange and
Third Party #1: Community Wheelhouse	Third Party #2: Community Wheelhouse
Contact: Christina Thompson, Director of Lending	Contact: Ivette Benitez, Director of R/E
Address: 3355 Bee Cave Rd, Ste. 301A, ATX 78746	Address: 3355 Bee Cave Rd, Ste. 301A, ATX 78746
Phone : 512-900-3683 x120	Phone : 512-900-3683 x 112
Email: christina@cwhaustin.com	Email: ivette@cwhaustin.com
And, I (We) hereby authorize above named LENDE information related to the account above to the A	R to release, furnish, provide, exchange and request uthorized Third Party identified above.
•	specify a period of time or the particular transaction for w. If no expiration date or operational transaction is revoked in writing.
ALL BORROWERS LISTED ON YOUR N	ORTGAGE MUST SIGN THIS AUTHORIZATION.
Signed by:	Signed by:
(Signature)	(Signature)
(Printed Name)	(Printed Name)
	•

PLEASE ATTACH A COPY OF YOUR ESCROW STATEMENT AND RETURN THIS FORM to info@cwhaustin.com or FAX to (512) 861-8698.

(Date)

(Date)

