

Third Party Authorization Form

Borrower Name

Co-Borrower Name

Loan Number

Property Address

The undersigned Borrower and/or Co-Borrower (if any) (individually and collectively, "Borrower" or "I"), authorize the above lender/servicer and its successors and assigns (individually and collectively, "Servicer") and the following third parties:

Third Party #1

Third Party #1 Contact Name and Phone Number

Third Party #2

Third Party #2 Contact Name and Phone Number

Third Party #3

Third Party #3 Contact Name and Phone Number

Relationship of Third Parties to Borrower and Co-Borrower

(individually and collectively, "Third Party") to obtain, share, release, discuss, and otherwise provide to and with each other public and non-public personal information contained in or related to the loan of the Borrower. This information may include (but is not limited to) the name, mailing address, telephone number, social security number, credit score, credit report, income, government monitoring information, loss mitigation application status, account balances, program eligibility, and payment activity of the Borrower. This also includes requests for documentation copies and updates to the file, such as phone numbers and mailing addresses. I also understand, and consent to the disclosure of my personal information and the terms of any agreements under the Making Home Affordable or Hardest Hit Fund Programs by Servicer or State HFA to the U.S. Department of the Treasury or their agents in connection with their responsibilities under the Emergency Economic Stabilization Act.

The Servicer will take reasonable steps to verify the identity of a Third Party but has no responsibility or liability to verify the identity of such Third Party. The Servicer also has no responsibility or liability for what a Third Party does with such information.

** Please note this form provides authorization to a designated third party to act on your behalf in a non-legal capacity. If you wish to designate an authorized party that has been given legal rights from the court/attorney in writing to act on your behalf in a legal capacity, please also provide proof of this document, which includes, but is not limited to, Power of Attorney, Letter of Administration, Court Appointed Guardian, or Executor documentation.*

This signed form and/or documentation needs to be mailed to: **PNC Bank, P.O. Box 1820, Dayton, OH 45401**, or faxed to **1-855-363-2738**. You will receive a confirmation letter from us. This authorization will remain on record for the life of the loan or until revoked, in writing, by you. A signed copy of this authorization may be accepted as an original.

This Third-Party Authorization is valid when signed by any borrower and/or co-borrower named on the loan and until the Servicer receives a written revocation signed by any borrower or co-borrower.

I UNDERSTAND AND AGREE WITH THE TERMS OF THIS THIRD-PARTY AUTHORIZATION:

Borrower:

Co-Borrower:

Printed Name

Printed Name

Signature

Signature

Date

Date

