File #:			_
•			-

## **AUTHORIZATION TO OBTAIN INFORMATION**

Owner(s):		
Property Address:		
I/We, the above Owner(s), he	ereby grant permission to the	title agency, to obtain any and all
information necessary to pro above.	cess the closing documents fo	r the sale / mortgage of the property shown
	ny. It may also include letters	ements for all outstanding mortgages, or statements regarding pending special
It is understood that a photocas authorization.	copy, facsimile, or electronical	lly transmitted copy of this form will serve
Owner Signature	Date	Social Security Number
Owner Signature	Date	Social Security Number
Loan Number:Address of Lender:		
Loan Number:		
Lender Phone / Fax No		
Property Tax Key Number:		