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Lender Authorization Form

Mortgage Company _____

Loan Number _____

Borrower (s) Name _____

Address _____

Contact Number _____

I authorize my Mortgage Company (named above) to discuss my request and release information for payment assistance with the individual(s) that I have identified below as my designated Agent(s). I also authorize you to work out the terms of a payment agreement with the designated Agent and/or their assignees and to cause to deliver requested documents to my designated Agent that concern a request for payment assistance. I understand that I am fully responsible to review any and all information sent by my Mortgage Company to my designated Agent.

Be further informed that this authorization will remain effective until I specifically notify my Mortgage Company's loss mitigation department in writing that this authorization is no longer in force or effect.

*All prior authorizations are null and void. _____
Borrower Initial Co-Borrower Initial

Please make all the appropriate notifications in your system to reflect this authorization.

My Designated Agent is: Judy Etman

Borrower's Signature Social Security # Date

Co-Borrower's Signature Social Security # Date