

FAIRWAY INDEPENDENT MORTGAGE

FILL OUT AND FAX THIS FORM TO:
Kris Wilson, Senior Loan Officer
(Fax) 952-487-8757

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

1. I/We authorize you to provide to **Fairway Independent Mortgage Corporation**, its agent, successor, assign or any investor to whom **Fairway Independent Mortgage Corporation** may have sold my mortgage loan, any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market, and similar account balances; credit history; and copies of income tax returns.
2. Fairway Independent Mortgage , its agent, successor, assign or any investor to whom **Fairway Independent Mortgage Corporation** may have sold my mortgage loan, may address this authorization to any party named in the loan application.
3. A copy of this authorization may be accepted as an original.
4. Your prompt reply to **Fairway Independent Mortgage Corporation**, its successor, assign or any investor to whom **Fairway Independent Mortgage Corporation** may have sold my mortgage loan is appreciated.

PRIVACY ACT NOTICE: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA) or by 12 USC, Section 1701 et. seq. (if HUD/FHA).

PRINT BORROWER FULL LEGAL NAME

SOCIAL SECURITY NUMBER

BORROWER SIGNATURE

DATE

FULL MAILING ADDRESS

E-MAIL ADDRESS

BIRTH DATE

DAYTIME TELEPHONE

EVENING TELEPHONE

FAX

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kris@kriswilson.com
www.kriswilson.com