

Authorization to Release Information

I (We) hereby authorize BCL of Texas, to verify my employment, and outstanding debt, including any present or previous mortgages, to order a consumer credit report if necessary, and to make any other inquiries pertaining to the counseling services they are providing to me at their request.

MORTGAGE LENDERS / SERVICERS:

I (We) further authorize the discussion of our case with Jan McNerney, Cindy Pecina, Claudia Gomez, Oscar Saenz, Raquel Valdez, or Alesha Larkins. They are working to help me address my financial problems and to propose a loss mitigation plan which is within your guidelines. You may release any further information to *BCL of Texas* in the future without further authorization.

PRIVACY ACT NOTICE: This information is to be used by the agency collecting it or its assignees in providing counseling services 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 the counseling services provided to you may be delayed or terminated.

Print Name- Borrower

Print Name- Co Borrower

Authorized Signature

Date

Authorized Signature

Date

____/____/_____
Date of Birth

____/____/_____
Date of Birth

____ - ____ - ____
Social Security #

____ - ____ - ____
Social Security #

Loan Number