



Michael Lagae
 Realtor® / Loan Officer
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Authorization To Release Information

Date: _____

To: _____

Owners/Borrowers: _____
 Property Address: _____

 Loan Number: _____
 Lien Information: _____

We, the undersigned, hereby authorize and request you to release all information and documents regarding the above-referenced lien or loan to Michael Lagae as my designated representative. You may transmit such information in written form, including U.S. Mail, facsimile or email and you are also authorized to verbally discuss my file with my representative.

This form may be duplicated in blank and/or sent via facsimile or email transmission. This authorization is a continuing authorization for said parties to receive information about the above obligation, including duplicates of any notices sent to me regarding my obligation.

In addition, I agree to release the above lender/lien holder from any and all liability relating to the release of the information and the method of its transmittal. This authorization is to remain in effect until I provide written notice of its termination to the above lender/lien holder.

Borrower: _____
 Print Name: _____
 Date of Birth: _____
 SSN: _____

Borrower: _____
 Print Name: _____
 Date of Birth: _____
 SSN: _____