



Homeowner's Authorization to Release Debt Information to Third Party

Property Address: _____

Homeowner's name: _____

Party Requesting Information ("Third Party"): _____

Relationship to Homeowner: _____

Contact Name

Phone Number

Address

City, State and Zip Code

The undersigned homeowner, authorizes the law firm of Larsen Slaten, PLLC and the Third Party set forth above, to obtain, share, release, discuss and otherwise provide to and with each other debt information relating to the delinquency associated with the above named property. This information may include (but is not limited to) the name, address, telephone number, social security number, credit score, credit report, income, government monitoring information, account balances, program eligibility and payment activity of the homeowner.

It is understood by the homeowner that Larsen Slaten, PLLC has no responsibility or liability to verify the identity of such Third Party, nor any responsibility or liability for what a Third Party does with such information.

I UNDERSTAND AND AGREE WITH THE TERMS OF THIS THIRD-PARTY AUTHORIZATION:

HOMEOWNER(S):

By (Signature): _____ Date: _____

Print Name: _____