



Emedel Realty
904 Idlewood Rd
Glendale, Ca 91202
Phone: 818-230-7272
Fax: 818-484-2015

Authorization to Receive and Convey Information

To:

Borrower(s):

Property Address:

Loan Number:

I, the undersigned, hereby authorize you to receive and convey information regarding the above referenced loan to **Emedel Realty** and/or their agents or assigns. This authorization is a continuing authorization for said parties to receive information about my loan, including duplicate of any notices sent to me regarding my loan.

Signature: _____

Date: _____

SSN: _____

Signature: _____

Date: _____

SSN: _____