

Save the American Dream

PH: 1-888-572-8387

Fax: 1-954-397-7353

AUTHORIZATION FORM

Borrower _____ **Last 4 numbers of social** _____

Co-Borrower _____ **Last 4 numbers of social** _____

Property Address _____

_____ **Zipcode** _____

Telephone Numbers _____

Lender _____

Loan Number _____

Servicer _____ **Telephone** _____

Save the American Dream Representative _____

I authorize Save The American Dream Investment Services Corporation and its representatives to speak on my behalf regarding my loan with my lender and with whoever has servicing responsibilities for my loan.

I also authorize the lender and/or servicer handling my loan to discuss my loan with Save The American Dream Investment Services Corporation.

I authorize Save The American Dream Investment Services Corporation to pull credit reports to evaluate my credit for loss mitigation purposes.

I authorize the lender and/or servicer to notify Save The American Dream Investment Services Corporation in the event that my loan payments become delinquent in the future, if the lender or servicer chooses to provide this service.

Borrower Signature _____ Date _____

Co-Borrower Signature _____ Date _____