

## **AUTHORIZATION TO COMMUNICATE WITH LENDER AND FOR RELEASE OF INFORMATION**

By signing this Authorization, I hereby authorize and direct the below named lender and/or banking institution to use or disclose and share information to all agents and employees of the Bergermann Law Firm, including Vera Bergermann, Jason King, and Kimberly Lee, any and all information contained in my file with said lender:

Borrower: \_\_\_\_\_

Borrower Social Security No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Lender: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Account/Loan No.: \_\_\_\_\_

Property Address: \_\_\_\_\_  
\_\_\_\_\_

I authorize the entire records related to the borrower(s) to be used or disclosed as set forth in this Authorization. I further authorize the above named lender to communicate with the agents and employees of the Bergermann Law Firm as named above for the purposes of negotiating the terms and conditions of the loan(s) for modification/short sale/deed in lieu of foreclosure.

I authorize the information to be disclosed to all employees of the Bergermann Law Firm.

I understand that I have the right to revoke this Authorization at any time in writing, except to the extent that the above named lender has already acted in reliance on this Authorization. I may revoke this Authorization by providing written notice to:

Bergermann Law Firm  
Post Office Box 9342  
Fort Myers, Florida 33901

I understand that information used or disclosed pursuant to this Authorization may be subject to re-disclosure by the recipient and no longer subject to privacy laws.

This Authorization shall be effective for two years or until I revoke same in writing.

Signature of Borrower:

By: \_\_\_\_\_

Dated this \_\_\_ day of \_\_\_\_\_, 2011.

Name of Borrower: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Signature of Additional Borrower (if applicable)

By: \_\_\_\_\_

Dated this \_\_\_ day of \_\_\_\_\_, 2011.

Name of Borrower: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_