

THIRD PARTY AUTHORIZATION FORM

Borrower Information						
LOAN NUMBER	BORROWER NAME		CO-BORR	CO-BORROWER NAME		
MAILING ADDRESS	CITY		STATE	POSTAL C	ODE	
Third Party Contact Information						
NAME OF AUTHORIZED PERSON OR COMPANY						
EMAIL ADDRESS	PHONE NUMBER		FAX NUMBER			
MAILING ADDRESS	CITY		STATE	POSTAL C	ODE	
THIRD PARTY CATEGORY (What is the relationship to the borrower(s)?)						
Authorization						
I hereby authorize New American Funding to discuss loan information and/or provide documentation to the above named Third Party regarding my mortgage. This authorization will remain valid for 1 year for non-relatives						
or for the life of the loan for relatives, and I have the authority to alter the length of the authorization period by						
contacting New American Funding.						
BORROWER SIGNATURE	CO-BORROWER SIGNATURE					
BORROWER NAME (PLEASE PRINT)	DATE	CO-BORROWER	R NAME (PLEASE	PRINT)	DATE	

LAST MODIFIED: MARCH 2023