

LOSS MITIGATION THIRD PARTY AUTHORIZATION AND AGREEMENT TO RELEASE

[Borrower Name]
[Borrower Address]
[City St Zip]

United Guaranty Certificate #
[UGCert#]
Loan #
[Loan#]

Borrower Name

SS# - Last Four Digits

Co-Borrower Name

SS# - Last Four Digits

Property Street Address

City State Zip

Lender/Mortgage Servicer Name

I/We, provide consent to my lender/mortgage servicer to release and otherwise provide to:

United Guaranty and its agents, any public and non-public personal financial information contained in my loan account which may include, but is not limited to, my name, address, telephone number, Social Security number, income, loss mitigation application status, credit score, and information about account balances and payment activity.

[Loss Mit Specialist Name]
United Guaranty
800.603.3565, ext. [rep ext]
336.275.2893 fax

If you agree to this Authorization and the terms of the Release as stated above, please sign, date, and fax this document to 336.275.2893. This authorization will not be valid unless signed by all borrowers and co-borrowers named on the mortgage. This Authorization will remain valid until revoked in writing by any borrower or co-borrower. I agree to contact the servicer if I wish to revoke this Authorization.

Borrower Signature

Date

Co-Borrower Signature

Date

United Guaranty Corporation
230 North Elm Street, Greensboro, NC 27401

United Guaranty Residential Insurance Company Tax ID # (last four digits): 5398. United Guaranty Mortgage Indemnity Company Tax ID # (last four digits): 4960. United Guaranty is a marketing term for United Guaranty Corporation and its subsidiaries. United Guaranty is a registered mark. Coverage is available through admitted company only.