MORTGAGE INFORMATION AND AUTHORIZATION

(Complete a separate Form for each Mortgage and Line of Credit)

LENDER:					
ACCOUNT NUMBER:					
PHONE NUMBER:					
To Whom It May Concern:					
I/We, do hereby authorize you information in connection with whether or not specifically reference.	n the above a	account or any			
Without limiting the generality Harrington Buck PC any and a sale requests.					
REQUEST TO FREEZE LI take this authorization as no cards affiliated with the acco	tice to close	and freeze my	account. All che	ecks and/or credit	
A copy of this authorization m	ay be accept	ted as an origin	al.		
Your prompt reply to Harringt	on Buck PC	is appreciated	in advance.		
Date:					
Signature:					
Print Name:					
Social Security No.:		-	-		
Signature:					
Print Name:					
Social Security No.:			_		