



RELEASE SHORT SALE FORECLOSURES

Date: _____

Seller #1: _____

Seller #2: _____

Last 4 Digits SSN: Seller #1: _____ Seller #2: _____

Creditor/Lien Holder: _____

Phone Number: _____

Property Address: _____

Loan Number: _____

Seller Consents to Creditor/Lien Holder Release of Information: Seller consents and request that the Creditor and its representatives communicate and provide any loan, financial or other information of Seller, confidential or otherwise, to any of the following parities involved in the transaction, initialed and named below, or their representatives:

(seller initials) (print names)
____ Seller's Attorney: _____

____ Seller's Agent: _____

____ Seller's Real Estate Broker: _____

____ Broker's Transaction Coordinator: _____

____ Title Insurance Company: _____

____ Other: _____:

____ _____:

Seller **Date** **Seller** **Date**

Note: This Seller Authorization should be submitted to the Creditor's Loss Mitigation Department. If the Property is in foreclosure, this form should also be submitted to the Creditor's law firm.