



Authorization to Release Information

Complete one form for each lien

Account # or Loan #: _____

Lender Name: _____

Lender Phone: _____

Lender Fax: _____

Property Address: _____

City: _____ State: _____ Zip: _____

I hereby authorize you to release any and all information regarding my account for the above address, including loan status, interest rate, payoff amount, amount of monthly payment, late charges, penalties, and fees (if applicable), foreclosure attorney's name and phone number to the following:

SAM Home Key Group LLC, Dba Home Key Servicing
PO Box 2660, Grapevine TX 76099
info@homekeyservicing.com
Phone (214) 810-4711

Borrower #1: _____ SS#: _____ - _____ - _____

Signature: _____ Date: _____

Borrower #2: _____ SS#: _____ - _____ - _____

Signature: _____ Date: _____