

Authorization Form

This form will serve to acknowledge that the captioned mortgagor has authorized our firm, Home Savers, to act in their behalf to resolve their mortgage problems. This is in accordance with Title 24 of the CFR 203.500(HUD).

Mortgagor

Name:

Spouse Name:

Property Address:

City, State, Zip:

Social Security of the Primary Borrower:

Mortgagee

Lender:

Street Address:

City, State, Zip:

Loan Number:

Mortgagor's Signatures

Mortgagor:

Co-Mortgagor:

D.C. Fawcett -Mitigation Specialist
Bob Abbenzeller -Mitigation Specialist