

THIRD-PARTY AUTHORIZATION FORM

To protect your privacy, The REI Lender requires your written consent to discuss any non-public information about your loans and accounts with any third party (such as an assistant, employee, or general contractor). **If you wish for us to discuss your accounts with any third party, complete this form in its entirety.**

1. Borrower and Loan Information

Borrower Entity: _____ Title: _____
Borrower Representative: _____ Email: _____
Loan Number(s): _____ or Number: _____
 All Loans for Borrower

2. Authorized Third-Party Information Complete Schedule I if more than one third-party is authorized.

Name: _____ Address: _____
Email: _____
Number: _____ Title (if applicable): _____

The following checked box indicates the relationship I have with the Third-Party:

Legal (e.g., attorney) Business (e.g., partner, employee) Contractor Other: _____

3. Authorization Granted and Acknowledgement

Effective immediately, I authorize the third-party(ies) designated on this form to (check all that apply):

- Discuss my loans and accounts
- Make changes to my accounts, including any changes to payment instructions
- Request payments, including advances and construction draws

This authorization will remain in effect for the life of the loan(s) unless I revoke this authorization in writing. I understand that The REI Lender will take reasonable action to verify the identity of the third party(ies), but also acknowledge that The REI Lender has no responsibility or liability to verify any third party’s identity. I further acknowledge that The REI Lender has no responsibility or liability for what any third party does with my information or accounts.

Borrower

By: _____
Title: _____

Date: _____
Date: _____

Schedule I

Name: _____ Address: _____
Email: _____
Number: _____ Title (if applicable): _____

The following checked box indicates the relationship I have with the Third-Party:

Legal (e.g., attorney) Business (e.g., partner, employee) Contractor Other: _____

Name: _____ Address: _____
Email: _____
Number: _____ Title (if applicable): _____

The following checked box indicates the relationship I have with the Third-Party:

Legal (e.g., attorney) Business (e.g., partner, employee) Contractor Other: _____

Name: _____ Address: _____
Email: _____
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