

Washington County Community Development Agency Down Payment Assistance Program



Authorization for Release of Information

7645 Currell Boulevard, Woodbury, MN 55125-2256
Phone: (651) 458-0936 Fax: (651) 458-1696



I/We hereby authorize **Washington County Community Development Agency (CDA)**; Federal Tax ID No. 41-xxx8079), its agents or assigns to verify my/our past and present employment earnings, records, past and present employment status, bank accounts, obligations, and all other financial matters that are needed to process my/our application.

I/We authorize CDA to verify other credit information, including income, employment, and asset accounts. I/We also give my/our consent to contact my/our accountant, tax preparer, or the Internal Revenue Service, in the event my/our tax returns are needed to verify any reported income.

I/We further authorize CDA to exchange information with all pertinent parties to assist me in identifying my options. "Pertinent parties" shall include, but are not limited to, attorneys, loan originators, my/our mortgage lender or mortgage servicer(s), realtor, closing/title company, the Minnesota Housing Finance Agency and the U.S. Department of Housing and Urban Development. It is understood that a photocopy of this form will also serve as authorization.

Additionally, I/we understand, acknowledge, and agree that the Lender and Other Loan Participants can obtain, use and share tax return information for purposes of (i) providing an offer; (ii) originating, maintaining, managing, monitoring, servicing, selling, insuring, and securitizing a loan; (iii) marketing; or (iv) as otherwise permitted by applicable laws, including state and federal privacy and data security laws. The Lender includes the Lender's affiliates, agents, service providers and any of aforementioned parties' successors and assigns. The Other Loan Participants includes any actual or potential owners of a loan resulting from your loan application, or acquirers of any beneficial or other interest in the loan, any mortgage insurer, guarantor, any servicers or service providers for these parties and any of aforementioned parties' successors and assigns.

The information CDA, its agents or assigns obtains is to be used in the processing of my/our application for CDA's Down Payment Assistance Program, I further allow CDA to contact my mortgage lender for a period of up to 36 months from the date of this application to inquire about the status of my/our mortgage, allowing Program staff to track the long-term effects of the program.

Applicant Name (*please print*): _____

Social Security Number: _____

Co-Applicant Name (*please print*): _____

Social Security Number: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Applicant's Signature: _____ **Date:** _____

Co-Applicant's Signature: _____ **Date:** _____

Permission to speak with the following person(s) and/or company(s):

WCCDA Counselors: Dana Slimmer and Heather Posthumus

WCCDA Tax ID: 41-xxx8079