

15480 Laguna Canyon Rd. Suite 100 Irvine, CA 92618 888.699.5600 toll free 949.341.0777 local 949.341.2200 fax www.rushmorelm.com

THIRD PARTY AUTHORIZATION REQUEST FORM

Please complete:				
Date:	Loan Number:			
Property Address:				
City and State:		Zip Code:		
The undersigned individuals have ("RUSHMORE") and hereby authoriscuss the above referenced mo "Designated Agents").	orize RUSHMORE	, its associates, agents and/or as	ssigns the right to	
Please state in what capacity the example: real estate agent, loan authorized party is legal counsel representation to our office that	officer, attorney, for you then we	, spouse, loss mitigation advisor, also require that they submit a s	etc. If the	
Designated Agent:				
Name	Phone No.	Relationship to Bo	Relationship to Borrower	
Name	Phone No.	Relationship to Bo	Relationship to Borrower	
I/We hereby authorize RUSHMORE to discuss my/our request for payment assistance/foreclosure alternatives with the individual(s) that I/We have identified above as my/our Designated Agent(s). Further, RUSHMORE is hereby authorized to negotiate the terms of a workout agreement with my/our Designated Agent and to deliver documents to my/our Designated Agent which concerns my/our request for payment assistance/foreclosure alternatives. I/We understand that I/We will be fully responsible for reviewing any information that is sent by RUSHMORE to my/our Designated Agent. This Authorization will remain effective until I/We specifically notify RUSHMORE's Home Retention Department in writing that this Authorization is of no further force and effect.				
Borrower Name:	Date	Borrower Name	Date	
Borrower Signature	Date	Borrower Signature	Date	