DELAWARE COMMUNITY REINVESTMENT ACTION COUNCIL, INC.

20127 Office Circle, Georgetown, DE 19947
603 N Church Street, Wilmington, DE 19801
600 S Harrison Street, Wilmington, DE 19805

Third Party Authorization

Client Name: _____ _____
Social Security Number: _____ _____
Date of birth: _____ _____
Property Address: _____
Telephone: _____ _____

_____ _____
Lender/Other **[Account][Loan] Number**

The undersigned Borrower and Co-Borrower (if any) (individually and collectively, "Borrower" or "I"), authorize the above Servicer/Lender and the following third parties (individually and collectively, "Third Party") **DELAWARE COMMUNITY REINVESTMENT ACTION COUNCIL, INC.**

Lillian Harrison	**lharrison@dcrac.org**	**302-298-3289**	**F: 888-891-7923 or**
Joe Gross	**JGross@dcrac.org**	**302-298-3254**	**F: 866-768-0991 or**
Jaclyn Quinn	**JQuinn@dcrac.org**	**302-298-3251**	**F: 888-746-3530**

to submit, obtain, share, release, discuss, and otherwise provide to and with each other public and non-public personal information contained in or related to the mortgage loan of the Borrower. This Authorization IS VALID FOR A PERIOD OF ONE (1) YEAR.

I understand and consent to the disclosure of my personal information and the terms of any agreements under the HUD Comprehensive Counseling Grant. This Third-Party Authorization is valid when signed by all borrowers and co-borrowers named on the mortgage and until the Servicer/Lender receives a written revocation signed by any borrower or co-borrower to the U.S. Department of the Treasury or their agents in connection with their responsibilities under the Emergency Economic Stabilization Act. The Servicer will take reasonable steps to verify the identity of a Third Party, but has no responsibility or liability for what a Third Party does with such information.

I understand that DCRAC receives funding from various sources and as such I authorize:

1. DCRAC to submit client-level information to the Data Collection System for HUD/NCRC/other grant
2. NCRC/HUD/Other to open files to review for program monitoring and compliance purposes
3. NCRC/HUD/Other to conduct follow-up with the client related to program evaluation.

Beware of foreclosure rescue scams and anyone who asks you to pay a fee in exchange for a counseling service for modification of a delinquent loan.

_____ _____ _____
Borrower **Co-Borrower** **Date**