



2476 Lake Ave Altadena, Ca. 91001

Phone: 626.296.7777

Fax: 626.296.7771

www.albcommercialcapital.com

APPLICANT’S AUTHORIZATION TO RELEASE INFORMATION

Please be advised that I/We have applied for a mortgage loan through ALB Commercial Capital (ALB). As part of the application and loan process, ALB may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.

I/We authorize ALB Commercial Capital to request and obtain any information and documentation required by ALB, and/or its prospective affiliates, investors, participants, buyers, agencies, and other representatives to complete the processing of the loan request. Necessary credit information may include but is not limited to, employment history and income; bank, money market and similar account balances; credit balances, payments and history; copies of income tax returns; and subordination agreements/requirements.

A photographic or carbon copy of this authorization bearing a photographic or carbon copy of the signature(s) of the undersigned will be deemed as acceptable authorization for release of any of the above information or documentation requested by ALB.

This form must be signed and returned in order to continue the processing of your loan.

Requested By: ALB Commercial Capital
2476 Lake Ave
Altadena, CA. 91001

PLEASE COMPLETE THE FOLLOWING: **(PLEASE PRINT CLEARLY)**

Applicant Name Print Here:

Co-Applicant Name Print Here:

Date of Birth: (format mm/dd/yyyy)

Date of Birth: (format mm/dd/yyyy)

Social Security Number:

Social Security Number:

Present residence address- (Include Zip Code)

Present residence address- (Include Zip Code)

Applicant Sign Here:

Applicant Sign Here:

Date: _____

Date: _____