



212-615-8329
 housing@recovery.nyc.gov
 nyc.gov/builditback

F9: Authorization for Release of Mortgage Loan Information

 Property Address

 City, State, Zip

I, the undersigned, hereby authorize the City of New York (the "City") and its assigns, employees, agents, and contractors (collectively, the "Assistance Providers") to obtain any information on the mortgage loan account(s) listed below, including, but not limited to: Loan status, interest rate, payoff amount, amount of monthly payment, late charges, penalties and fees (if applicable), and any other information about the account that might otherwise be protected through the Right to Financial Privacy Act of 1978, Fair Credit Reporting Act, or any other federal, state, local, or lender regulations. This authorization expires six months after its issuance, or until revoked by me, whichever is earlier.

Financial Institution	Account Number

It is understood that a photocopy of this form or facsimile will serve as authorization.

_____ Applicant (Print Name)	_____ Signature	_____ Date
_____ Additional Applicant (Print Name)	_____ Signature	_____ Date
_____ Additional Applicant (Print Name)	_____ Signature	_____ Date
_____ Additional Applicant (Print Name)	_____ Signature	_____ Date