CitiMortgage





Third Party Mailing Authorization To be completed by: <u>Homeowner(s)</u>

		elease the following information to, and/or work directly with, processing of the claim as indicated below: (INITIAL ALL THAT
	Authorization to release claim information to named par	ty.
	$\label{party} \mbox{ Authorization for named party to request inspections. }$	
	Authorization for CitiMortgage to work directly with the n with all aspects of processing of the claim, including dis	[
	Authorization for CitiMortgage to release disbursements	payable solely to named party.
BORRO	WER AUTHORIZATION FOR:	
(Individual o	r Company)	
(Cantact Telephone Number)		
(Authorized Party Address) If you prefer your check be mailed to an alternate location, please indicate the recipient's name and address and sign the authorization form below.		
(Recipient's	Name)	
(Recipient's	Address)	
rescind t	ccount information such as payment status, loan type, etc. this authorization at any time during the process arbal or written request.	, is not included within this authorization. The borrower(s) can
<u> </u>	(Primary Borrower's Signature)	(Date)
î .	(Co-Borrower's Signature)	(Date)