



South Carolina State Housing Finance and Development Authority

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Authorization to Release Information

This form is not valid unless notarized or accompanied by a copy of your drivers license.

LOAN NUMBER _____

I, the undersigned, hereby authorize you to release information regarding the above-referenced loan to _____ and/or their agents or assigns.

ADDRESS _____

PHONE # _____ E-MAIL _____

RELATIONSHIP TO BORROWER _____

This authorization is a continuing authorization for said parties to receive information about my loan until revoked.

By my signature, I understand and acknowledge that knowingly submitting false information may violate Federal and/or state law.

Print Name of Borrower _____ Last 4 digits of SSN _____

Signature of Borrower _____ Date _____

Subscribed to and sworn before me this _____ day of _____, _____.

_____ (Signature)

Notary Public for _____ (State)

My Commission expires: _____