



Account Authorization Form

| Customer Information | |
|----------------------------|--------------------------|
| Weststar Borrower(s) Name: | Weststar Account Number: |
| Property Address: | |

| Authorization Information | |
|---------------------------|---------------------------|
| Name: | Relationship to Customer: |
| Phone: | Fax: |
| Email Address: | |
| Address: | |

*I/we do hereby authorize the "Third Party" listed above to obtain public and non-public personal financial information contained in my Weststar Loan Servicing account which may include, but not limited to, loan balances, final payoff statement, loan payment history, payment activity, and/or property information. My signature approves the authorization of the third party. This authorization does not expire until revoked by me. *Authorizations for non-family members will expire in one year. Please return the completed form to lvcustomerservice@westloan.com.*

Borrower Signature

Date

Co-Borrower Signature (if applicable)

Date