

**AUTHORIZATION FOR RELEASE OF INFORMATION**

I, \_\_\_\_\_, the undersigned,  
(Print Name of City Client)

hereby authorize \_\_\_\_\_  
(Print Name of Entity Requesting Information)

to release, without liability, information regarding my loan with the City on the property at  
\_\_\_\_\_(Address)

to the City of Tallahassee for the purposes of verifying information on the balance and/or status of that loan.

**Types of information to be verified:**

I understand that previous or current information regarding my loan may be required. Information that may be requested includes, but is not limited to, the amount of the loan, the date of the loan, status of all superior mortgages, interest rates, payment amounts, and any other information needed by the entity to obtain all necessary data on my loan with the City.

I understand that **organizations/individuals necessary to gather the required documentation will be contacted by the City or its authorized officials.**

**Agreement to Conditions:**

I agree that a photocopy of this authorization may be used for the purposes stated herein. I understand that I have the right to review this file and correct any information found to be incorrect.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

Sign and email this completed document to the City of Tallahassee's Housing Division at housing@talgov.com, Attention DPA Program Payoffs. You may also call the Housing Division at 850-891-6566 and ask for Tyneasia Showers-Ross, DPA Housing Program Specialist.