

MMS

Madison Management Services, LLC

126 Route 10, Suite 5, Succasunna, NJ 07876

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BORROWER'S AUTHORIZATION

To whom it may concern: **Authorization to Release Information**

1. I/We authorize you to provide **Madison Management Services, LLC** and/or to any of its agents, successors, assigns and to any prospective investor to whom **Madison Management Services, LLC** may sell my/our mortgage or deed of trust any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market and similar account balances; credit history; copies of tax returns, W-2 income information, social security income and any other detailed earning information.
2. **Madison Management Services, LLC** or any investor that purchases the mortgage or deed of trust may address this information to any party named on the loan application.
3. A copy of this authorization may serve as an original.
4. Your prompt reply to **Madison Management Services, LLC** or any investor that purchases the mortgage or deed of trust is appreciated.

Signature

Date

(Social Security Number)

Signature

Date

(Social Security Number)