

**WESTCHESTER RESIDENTIAL OPPORTUNITIES CIS INFORMATION SERVICES**  
 470 MAMARONECK AVENUE, SUITE 410  
 WHITE PLAINS, NY 10605  
 Fax: 914-428-9455

PANTHER VALLEY VILLAGE SQUARE  
 ALLAMUCHY, NJ 07820  
 800-275-7722

**BORROWER SIGNATURE AUTHORIZATION FORM**

I/We hereby authorize WESTCHESTER RESIDENTIAL OPPORTUNITIES to verify my past and present employment earnings records, bank accounts, stockholdings, and any other asset balances that are needed to process my mortgage loan application. I/We further authorize WESTCHESTER RESIDENTIAL OPPORTUNITIES to order a consumer credit report and verify other credit information, including past and present mortgages, landlord references, and release or disclose personal health information.

WESTCHESTER RESIDENTIAL OPPORTUNITIES may also utilize the services of CIS INFORMATION SERVICES to further verify my personal credit information and the information WESTCHESTER RESIDENTIAL OPPORTUNITIES obtains is only to be used in the processing of my application for a mortgage loan. It is understood that a copy of this form will also serve as authorization. This authorization expires 120 days from the date indicated below.

**Privacy Act Notice:** This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et. seq., or 7 USC, 1921 et. seq. (if USDA/FmHA).

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Borrower Signature	Social Security No.	Date
_____	_____	_____
Borrower Signature	Social Security No.	Date
_____	_____	_____
Borrower Signature	Social Security No.	Date
_____	_____	_____
Borrower Signature	Social Security No.	Date