Borrower Signature Authorization

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).

Part I - General Information				
1. Borrower(s)		18000 PIONEER B ARTESIA, CA 9070	c., dba My City Financial LVD SUITE 206 01	
		TEL: 562-608-8811	1 FAX: 866-386-6063	
3. Date	4. Loan Number			
Part II - Borrower Author	orization			
holdings, and any other the Lender/Broker to comortgage and landlore	Lender/Broker to verify my past and are asset balances that are needed order a consumer credit report and references. It is understood the ender/Broker obtains is only to be	ed to process my mort and verify other credit hat a copy of this fo	tgage loan application. I information, including pa orm will also serve as	further authorize ast and present authorization.
Borrower			Date	-
Borrower			Date	-