ROUNDPOINT

THIRD PARTY AUTHORIZATION FORM

Please complete this form in its entirety. To protect the privacy of our customers, RoundPoint Mortgage Servicing Corporation (RoundPoint) requires written consent from the borrower to discuss any non-public information regarding existing or prior serviced loans.

Step 1: Your Contact Information

Loan Number: _____

Borrower Name: _____ Co-Borrower: _____

Primary Phone: _____ Email Address: _____

Property Address: _____ Mailing Address: _____

_____ _____

Step 2: The Authorized Third Party's Contact Information

Authorized Party or Organization: _____

In the section below, please choose the type of relationship you have with the Authorized Third Party.

Personal or Legal Relationship:	· Spouse/Relative	· Attorney	· Other (describe above)
Business or Contract Relationship:	· Realtor/Title Company	· Counseling Agency	· Contractor

Authorized Party Address: _____

Authorized Party Phone Number: _____ ATP Password: _____

Step 3: Length of Authorization

Effective until (MM/DD/YYYY): _____ /_____ /_____

- The authorization will remain for the timeframe selected unless revoked in writing. If an expiration date is not provided, then the authorization may remain until the maturity date of the loan.
- For personal or legal relationships: the authorization may last for the life of the loan and the authorized party may be able to make changes to the account.
- For business or contract relationships: the authorization will not exceed ninety (90) days, but can be less if the expiration date provided is less than 90 days from the date we receive the form. The authorized party will not have access to make changes to the account. If you are authorizing a contractor for the purpose of an insurance claim, authorization may be extended until completion of the claim.

Step 4: Your Signature

I hereby authorize the above-referenced individual(s) to obtain information regarding and/or make changes to my mortgage loan identified above. RoundPoint will take reasonable steps to verify the identity of the Authorized Party, including request of additional identifying information, but will have no responsibility or liability to verify the true identity of the Authorized Party.

Signature(s): _____ Last four digits of Social Security Number: _____

Borrower

_____ Last four digits of Social Security Number: _____

Co-Borrower

Step 5: Returning the form

Please return the completed form to RoundPoint via the following options:

Email: ServicingHelp@RoundPointMortgage.com **Fax Toll Free:** (877) 776-1112

Mailing Address: RoundPoint Mortgage Servicing Corporation
P.O. Box 19409 Charlotte, NC 28219-9409

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