



1981 Blake Street
 Denver, Colorado 80202
 888.925.5720
 800.877.chfa (2432)
 www.chfainfo.com

single family loan servicing authorization to communicate to a third party

A third party is a person or persons other than those listed on your loan documents. It is CHFA's policy to require a completed Authorization to Communicate to a Third Party form prior to releasing any information about your loan to a third party. CHFA will only release information to third parties authorized and identified by this form.

Borrower Name(s)	Loan Number
Property Address	

third party information

Name of Entity/Agency, Firm	Phone Number
Name(s) of Authorized Person(s)	
Mailing Address	
Office Address	
Email	Website Address

third party acknowledgement

all third parties must sign

The undersigned, on behalf of the Third Party, represents that: (i) it is in compliance with all applicable laws and regulations; and (ii) the Third Party information provided above is true and correct. The undersigned acknowledges that a misrepresentation or omission of fact made in connection with a government program may result in civil/criminal prosecution.

 Signature of Third Party Date

 Name (print) Title/Company

 Signature of Third Party Date

 Name (print) Title/Company

borrower authorization

all borrowers must sign

I authorize CHFA to share public and nonpublic information about my CHFA loan to the above-named third party. I understand that this Third Party Authorization form may not be accepted. CHFA and its agents have procedures in place to detect fraud or improper activity and must follow privacy laws to protect borrower information.

This Authorization is valid until revoked by the undersigned in writing with a reasonable opportunity to act thereon.

Signature of Borrower

Date

Printed Name

Last 4 digits of SSN

Phone Number

Email

Signature of Co-borrower

Date

Printed Name

Last 4 digits of SSN

Phone Number

Email

Please note: This form should be transmitted to CHFA as soon as possible and no later than 90 days after the date signed. Please send to the address listed below:

CHFA
Attention: Single Family Sub-servicing Oversight
1981 Blake Street
Denver, CO 80202