THIRD PARTY AUTHORIZATION RELEASE FORM

San Diego County Credit Union

To: San Diego County Credit Union

Re: _____
(Property Address)

I/We hereby authorize _____ of _____ ("Agent") to discuss and obtain information about my/our loan(s) secured by the referenced property, account number(s) _____ ("Account"), with San Diego County Credit Union pertaining to my/our request for payment assistance, negotiation of terms of a workout agreement or any current or future foreclosure action against the property or sale of the property. You are further authorized to deliver documents to my/our Agent(s) which concern(s) my/our request for repayment assistance or sale of the property. I/We understand that I/we will be fully responsible for reviewing any information that is sent by San Diego County Credit Union to my/our designated Agent(s).

San Diego County Credit Union will take reasonable steps to verify the identity of Agent(s), but will have no responsibility or liability to verify the true identity of Agent(s) following the verification of the initial Authorization when Agent(s) ask(s) to discuss my/our Account(s) or seeks information about the Account(s). Nor shall San Diego County Credit Union have any responsibility or liability with what the Agent(s) does/do with the information Agent(s) obtain(s) concerning my/our Account(s).

I/We hereby indemnify and hold harmless San Diego County Credit Union, its successors and/or assigns from all actions and causes of actions, suits, claims or demands against San Diego County Credit Union, its successors and/or assigns which I/we or my/our heirs, successors or assigns have, had, or may have resulting from San Diego County Credit Union discussing my/our) Account(s) and/or providing any information concerning my/our Account(s) with or to the Agent(s) or a person claiming to be the Agent(s).

This Authorization will remain in effect until I/we specifically notify San Diego County Credit Union in writing that this Authorization is of no further force and effect.

In Witness Whereof, I/we have signed this Authorization of my/our own free will, intending to be bound thereby.

Borrower's Signature	**Last 4 Digits SSN**	**Date**
Borrower's Signature	**Last 4 Digits SSN**	**Date**