



TFS Mortgage Corporation, Inc.

CREDIT REPORT AUTHORIZATION

BORROWER:

SOCIAL SECURITY NUMBER:

DATE OF BIRTH:

AGE:

CO-BORROWER:

SOCIAL SECURITY NUMBER:

DATE OF BIRTH:

AGE:

STREET ADDRESS:

CITY:

STATE:

ZIP:

I/WE HEREBY GIVE MY/OUR CONSENT TO ALLOW TFS MORTGAGE CORPORATION, INC. TO RUN A CREDIT REPORT ON MY/OUR CREDIT HISTORY. I/WE HEREBY ACKNOWLEDGE RECEIPT OF THE WRITTEN CONSUMER PRIVACY NOTICE FOR THE TFS FAMILY OF COMPANIES.

BORROWER SIGNATURE

DATE

CO-BORROWER SIGNATURE

DATE

SUBMITTING MLO:

PHONER:

437 Newman Springs Road | Lincroft, NJ 07738

Tel: 1-800-833-1862 | Fax: 732-758-9418 | Web: www.tfsweb.com

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Registered Mortgage Broker: NYS Banking Department and Florida Office of Financial Regulation • NMLS ID 51460