



9425 Sunset Drive, Suite 124, Miami, Florida 33173
Phone 305 271-0100 fax 305-726-0096 info@theclosingcompany.net

Attn: The Closing, Company, Inc.

Authorization to release information and/or documents to a third party

I was the (must check one): ☐ buyer ☐ seller ☐ borrower ☐ other _____

My name: _____

Phone # _____ email _____

The Closing Company, Inc file#: _____

Property Address: _____

Lender name (if applicable) _____

Loan# _____

Last 4 digits of buyers/seller social security number: _____

Estimated closing date: _____

I, _____, hereby authorize you to release information and all documents pertaining my closing to the following person:

name _____

company _____

This authorization is good for 60 days from date signed below .

Signature(s) date

Print name