

H I G H L I G H T



R E A L T Y



6673-B Lake Worth Rd.
Lake Worth FL .33467
Tel: 561-641-6787

RELEASE INFORMATION AUTHORIZATION

Lender Name: _____ Loan : _____
Property Address: _____
City: _____ State _____ Zip: _____

I/We hereby authorize you to release to HIGHLIGHT REALTY and _____

any and all information for the transfer or payoff for the
above mentioned loan for the above referenced property . You
are granted permission to reproduce this document to acquire
reference from more than one source.

Borrower's signature _____ SS# _____ Date _____

Printed name _____

Co-Borrower's signature _____ SS# _____ Date _____

Printed name _____

Notary Seal here