DOMINION LENDING CENTRES

This form authorizes DLC to release confidential mortgage information to my mortgage broker and his or her assistants.

Note: This authorization is valid until cancellation has been received by DLC in writing.

The purpose of this form is (please check one):

To authorize a mortgage broker to utilize this information for mortgage consultation or refinancing purposes**; or**

To cancel the existing authorization of the mortgage broker identified below.

Borrower Information:

Borrower Names:

Borrower Address:

Mortgage Number:

Broker Information:

Broker Name:

Business Address:

Telephone Number:

Authorization:

Consented to this   day of   , 20

at   , in the Province of   .

Borrower Name:

Signature: _____   **Date:**

Note: this form will not be accepted unless it is signed by all borrowers. Use two forms if more than two borrowers are on the loan or if borrowers reside at different addresses.