

First Priority Financial, Inc.

INFORMATION AUTHORIZATION SHEET
QUALITY CONTROL/REVERIFICATION AUTHORIZATION

TO WHOM IT MAY CONCERN:

In connection with a loan application I/We hereby authorize **First Priority Financial, Inc.** and its assigns to verify or re-verify any information attached to this form including, **but not limited to**, the following:

- 1) Credit History 2) Employment History 3) Bank Accounts

We, the undersigned applicants, understand that our mortgage application may be selected for a quality control review in accordance with government regulations. Such a review is aimed at producing and maintaining quality service for our borrowers.

Authorization is further granted to **First Priority Financial, Inc.** or its assigns to use a Photostat copy of my/our original signatures below, to obtain information regarding any of these items.

This is a notice to you as required by the Right to Financial Privacy Act of 1978 that the Department of Housing and Urban Development/Department of Veterans Affairs has a right of access to financial records held by a financial institution in connection with the consideration or administration of assistance to you. Financial records involving your transaction will be available to the Department of Housing and Urban Development/Department of Veterans Affairs without further notice or authorization but will not be disclosed or released to another Government Agency Department without your consent except as required or permitted by law.

_____ Signature	_____ Date	_____ Social Security Number
_____ Signature	_____ Date	_____ Social Security Number
_____ Signature	_____ Date	_____ Social Security Number
_____ Signature	_____ Date	_____ Social Security Number