AUTHORIZATION TO DISCLOSE INFORMATION

Once you have completed and signed the form, you may send by mail:

- Mortgage Servicing Department PO Box 22248, Bankers Hall Calgary, AB T2P 4J6
- or by fax to 416.342.1095
- or by email to mortgageservicing@haventreebank.com

If you have any questions, please contact one of our mortgage servicing specialists at 1.855.272.0051.



1.855.272.0051

Haventreebank.com

PO Box 22248, Bankers Hall Calgary, AB T2P 4J6

то	Haventree Bank
ATTENTION	Mortgage Servicing Department
FROM	
	CUSTOMER NAME(S)
PROPERTY ADDRESS	
MORTGAGE NUMBER	

I/we hereby authorize Haventree Bank and any of its representatives to disclose any information concerning me/us in your possession, including information of a personal nature, and discuss any other facts or details concerning my/our account(s) with the individual named below.

RELATIONSHIP TO CUSTOMER	
COMPANY (IF APPLICABLE)	
ADDRESS	
PHONE NUMBER	
MOBILE NUMBER	
EMAIL ADDRESS	

This authorization shall continue in force until revoked in writing by me/us.

Signed at _____ this ____ day of _____ 20 ____.

Client Signature

Client Signature

This form does not authorize the named individual to request maintenance or changes to the status or terms and conditions of the account.