



Certification & Authorization Form

(Please Print)

Name: _____

Social Security No.: _____ Loan Number: _____

Date of Birth: _____

Address: _____

Spouse Name: _____

(If Applicable)

Social Security No.: _____

Date of Birth: _____

I/We Hereby authorize White Oak Foundation, Inc. and/or its assigned agents to order a consumer credit report on me/us and discuss my/our current situation with appropriate lenders and other professionals. It is understood that the information on my/our report will be used as necessary to evaluate my/our acceptance into foreclosure prevention program. White Oak Foundation, Inc. and its agents may obtain any or all documentation or information that they request for investigation and submission into their programs. No other use of my/our credit information is authorized by me/us.

I understand that White Oak Foundation, Inc. agent provides foreclosure mitigation counseling after which I will receive a written action plan consisting of recommendations for handling my finances, possibly including referrals to other housing agencies as appropriate.

I understand that White Oak Foundation, Inc. receives Congressional funds through the National Foreclosure Mitigation Counseling (NFMC) program and, as such, is required to share some of my personal information with NFMC program administrators or their agents for purposes of program monitoring, compliance and evaluation. I give permission for NFMC program administrators and/or their agents to follow-up with me within the next three years for the purposes of program evaluation

I may be referred to other housing services of the organization or another agency for agencies as appropriate that may be able to assist with particular concerns that have been identified. I understand that I am not obligated to use any of the services offered to me.

A counselor may answer questions and provide information, but not give legal advice. If I want legal advice, I will be referred for appropriate assistance.

I understand that White Oak Foundation, Inc. agent provides information and education on numerous loan products and housing programs and I further understand that the housing counseling I receive from White Oak Foundation, Inc. agent in no way obligates me to choose any of these particular loan products or housing programs.

BY signing below, you acknowledge you have read this disclosure(s) and have received a copy of White Oak Foundation, Inc. privacy policy to participate in this program.

Signed: _____

Date: _____

Signed: _____

Date: _____