



Third Party Authority Form

Mortgage Account Number

Please note that all parties to the mortgage must sign this form as confirmation that the authority has been granted.

1st Named
Customer

1st Named
Customer
Signature

Date

2nd Named
Customer

2nd Named
Customer
Signature

Date

3rd Named
Customer

3rd Named
Customer
Signature

Date

4th Named
Customer

4th Named
Customer
Signature

Date

Address of
mortgaged property

Home Telephone Number

Mobile Telephone Number

*Best time to contact

* Please Note our office hours are Monday to Friday 9:00am to 5:00pm

I/We give my/our authority for Whistletree to discuss or forward any information regarding the above named mortgage account to:

Name

Address

Telephone Number

Fax Number

Extension

I/We understand that this authority will remain in place for the term of the mortgage unless I/we (or any one of us) advise Whistletree that it is withdrawn.