



# ANCHOR TITLE

REAL ESTATE CLOSINGS

Tennessee Closings  
725 Cool Springs Blvd Suite 201  
Franklin, TN 37067  
Office // 615.807.1208  
Fax // 615.807.1209

Florida Closings  
1211 N. Westshore Blvd Suite 416  
Tampa, FL 33607  
Office // 813.286.7300  
Fax // 813.286.7301

## AUTHORIZATION TO RELEASE INFORMATION

Mortgage Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Loan Number: \_\_\_\_\_

Property Address: \_\_\_\_\_

\_\_\_\_\_

To Whom It May Concern:

Please be advised that we have retained The Title Company of Brevard, Inc. d/b/a The Title Company to handle the closing on the sale of the above-referenced property, and hereby authorize you to release any and all information relating to our mortgage account(s) with your company to the following individual(s) at The Title Company:

April G. Nichols, Managing Member  
Thomas Bonds, Managing Member  
Baley N. Bodden, Office Manager (FL)  
Sarah Nunley, Office Manager (TN)

April@AnchorTitleLLC.com  
[Thomas.Bonds@AnchorTitleLLC.com](mailto:Thomas.Bonds@AnchorTitleLLC.com)  
Baley@AnchorTitleLLC.com  
Sarah@AnchorTitleLLC.com

I/We also authorize \_\_\_\_\_ (listing agent) , of (listing brokerage) and his/her administrative assistant(s).

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I/We understand it is my/our responsibility to review this information. A photocopy of this authorization bearing the signatures of the undersigned may be deemed the equivalent of the original. This authorization is valid until the loan is satisfied or I/we notify you in writing of the revocation of same.

BORROWER: \_\_\_\_\_ SS # \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CO-BORROWER: \_\_\_\_\_ SS # \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_