



Authorization Form

By signature below, authorization is provided for Mr. Cooper to have direct contact with our client, (Client Name) _____, for the purpose of:

- Providing general account information.
- Assist in acceptance of payments.
- Discuss potential loss mitigation/loan assistance programs regarding the borrower(s) home mortgage.

I understand that Mr. Cooper will not initiate any calls directly to my client unless it is in response to an inquiry initiated by the borrower(s) or to further discussions of loss mitigation opportunities and/or the loss mitigation process.

Date: _____ Firm name: _____

Attorney or authorized party signature: _____

Firm telephone number: _____ Fax Number: _____