

CLIENT CONSENT – BROKER AUTHORIZATION

Fax: 1-866-325-2563 | broker@firstnational.ca

This consent authorizes and directs First National Financial LP (“**First National**”) to act upon written instructions from my/our mortgage broker or agent to make changes to my/our mortgage.* I/We acknowledge and agree that in connection with the making of such changes, First National may disclose confidential mortgage and personal information to my/our mortgage broker and/or agent. **ALL FIELDS BELOW MUST BE COMPLETED.** Once signed and submitted to First National, this consent will be effective until the date that a separate notice is received by First National from me/us cancelling this consent. I understand that this consent may also be cancelled by First National.

Date: _____

Client Name(s): _____

Mortgage Property Address: _____

FN Mortgage Number: _____

Contact Phone Number: _____

Email Address (Optional): _____

MORTGAGE BROKER INFORMATION

Mortgage Broker / Agent (Name(s)): _____

Brokerage Name:** _____

Contact Phone Number: _____

CLIENT AUTHORIZATION *(All borrowers must sign this form)*

Client Name: _____ Client Signature: _____
(print name)

Client Name: _____ Client Signature: _____
(print name)

Client Name: _____ Client Signature: _____
(print name)

Client Name: _____ Client Signature: _____
(print name)

* *The changes that may be made by my/our broker/agent will be limited to: balance requests and mortgage information statements, property tax inquiries, due date and frequency changes, payment increases and decreases, changes to bank account information for mortgage and other payments by pre-authorized debit (delivery of void cheque is required). The broker/agent shall also be authorized to obtain quotes on applicable prepayment charges and may request a copy of a renewal agreement.*

** *This consent also authorizes other brokers, agents and representatives of the same brokerage to make the changes and receive the information described in this Consent.*