

Escrow Authorization Form

This form must be signed by the current homeowner and provided to our office prior to the release any specific information to

Association Name.

Property Address.

If We attest that I am/ we are the owner (s) of record of the above reference property and that the individual/company listed below is representing me/us with respect to the transfer/refinance of this property.

Escrow Co. / Lender.

By signing below, I / We authorize Hoag Property Management, Inc. to release the necessary documents, disclosures, financial data, and other information pertaining to the above–mentioned property as requested by the Escrow Company or third party.

Name.

Signature.

Date.

Name: _____ Date: _____

Name: Signature: _____ Date: _____