

Acknowledgment and Authorization to Release Information

The undersigned is aware that Lender is relying on the information provided by Applicant(s) including, but not limited to tax statements, financial reports, business records, environmental information described in exhibits or attachments to the Application and any other information provided to Lender for evaluation and processing of Applicant's credit transaction to determine eligibility for this loan.

I/We hereby authorize the release to INSIGNIA Financial Services LLC, and/or any affiliates of any and all information that they may require for the purpose of a credit transaction. I/We authorize INSIGNIA Financial Services LLC, and/or any affiliates to release such information to any entity that they deem necessary for any purpose related to our credit transaction with them.

I/We certify that the enclosed information (plus any attachments or exhibits) is valid and correct to the best of my/our knowledge.

Signature of Applicant

Date

Home Address

Birth date

Social Security Number

Signature of Co-Applicant

Date

Home Address

Birth date

Social Security Number