



United States Representative Jerry McNerney

MORTGAGE ASSISTANCE AUTHORIZATION FORM

I understand that the provisions of Public Law 93-579 (Privacy Act of 1974) prohibit the disclosure of information of a personal nature from the files of an individual without his or her consent.

Accordingly, I authorize Congressman Jerry McNerney and his staff to access and review any and all of my records that relate to the issue stated below.

Signature _____ **Date** _____

To begin processing your case, please complete all of the following information:

Circle One: Mr. Mrs. Miss Ms. Date of Birth _____
 First Name _____ Last Name _____
 Address _____ City _____
 State _____ Zip _____ E-mail _____
 Daytime Phone _____ Evening Phone _____

Property Information

Date of Purchase: ____/____/____ Type of property (house, condominium, etc.): _____
 Address: _____
 City: _____ State: _____ Zip: _____ County: _____

Bedrooms	Bathrooms	Square Footage	Stories/Floors	Garage	Basement	Lot Size/Acres	Year Built

- Estimated current value of property: _____
- Total annual property taxes: _____
- Current condition of property: _____
- Is this property occupied by owner or is it rented by tenant?: _____
- Is desired outcome to keep or sell the property: _____
- If selling, is the property currently listed with a Realtor?: _____
- If yes, how long has the property been for sale?: _____

Mortgage Information

	<u>1st Mortgage</u>	<u>2nd Mortgage</u>
Lender's Name		
Loan Identification Number		
Balance		
Type of loan (Fixed, Adjustable, Interest-Only, etc.)		
Interest Rate (if adjustable, state the rate change and date of change)		
Total Monthly Payment		
Payments Current? If no, date of last payment?		

