

Short Sale Third-Party Authorization Form

BORROWER(S) ACKNOWLEDGMENT

Loan Number: _____ Property Address: _____

Borrower: _____

Co-Borrower: _____

The undersigned Borrower and Co-Borrower (if any) (individually and collectively, the “Borrower,” “Me” or “My”), authorize(s) Bank of America, N.A., its affiliates, agents and employees (collectively, “BANA”) to discuss with the third party(ies) described on the next page (the “Designated Representative(s)”) on My behalf the sale of the property at the above-listed Property Address (the “Property”), which is secured by a loan owned or serviced by BANA (“Mortgage”), for an amount less than the outstanding principal balance of the Mortgage (such transaction, a “Short Sale”):

Designated Representative: _____

Designated Representative: _____

Designated Representative: _____

Designated Representative: _____

My Designated Representative and BANA are hereby authorized to share with each other any and all information reasonably requested or otherwise required to be exchanged in connection with the consummation of the Short Sale, including without limitation names, addresses, telephone numbers, Social Security numbers, income, credit scores, status of any current or previous workout review, account, balances, program eligibility, payment activity and any other confidential (including nonpublic personal information) information related to Me, the Mortgage or the Property.

I further agree and acknowledge as follows:

- I have selected the Designated Representative.
- I acknowledge that BANA is not responsible for any act or omission of the Designated Representative, including anything the Designated Representative may do with information it is provided hereunder, or for any failure of the Designated Representative to competently perform its services.
- I agree that the Designated Representative can authorize a delegate to provide administrative support (“Designated Support Staff”) to facilitate procedural, or other clerical and administrative functions that are non-licensable activities on behalf of the Designated Representative. The Designated Support Staff is identified on the Designated Representative Acknowledgment.

This Third-Party Authorization will be effective until the completion of the Short Sale(s) unless terminated by me (us) in writing.

I UNDERSTAND AND AGREE WITH THE TERMS OF THIS THIRD-PARTY AUTHORIZATION.

Borrower's Signature Date Co-Borrower's Signature Date



DESIGNATED REPRESENTATIVE ACKNOWLEDGMENT

Each undersigned Designated Representative represents and agrees that, he/she (i) is a licensed real estate agent, real estate broker or attorney ("Licensee") in good standing in the state in which the Property is located, and that Licensee has all licenses, permits or authorizations required by state or federal law to perform the duties undertaken by it in connection with the Short Sale, (ii) shall not knowingly misrepresent or omit to state, any material fact in order to induce the Borrower(s), BANA, the lender, the investor or the insurer to agree to the terms of a Short Sale that the Borrower(s), BANA, the lender, the investor or the insurer would not have agreed to had all material facts been known, and (iii) is in compliance with all applicable state and federal laws, rules and regulations governing the services provided, including without limitation those related to providing required disclosures to the Borrower(s), and shall be responsible and liable for all of the acts and omissions of its Designated Support Staff authorized to work on his/her behalf.

Each Designated Representative and his or her Designated Support Staff involved in a Short Sale regarding:

Address _____ City _____ State _____ Zip _____

Must complete, sign and date below.

Designated Representative: _____ Company Name: _____

State Licensing Entity: _____ State Licensing/Registration Number: _____

Type of License: _____ Phone: _____ Email: _____

Designated Representative Signature _____ Date _____

Designated Representative: _____ Company Name: _____

State Licensing Entity: _____ State Licensing/Registration Number: _____

Type of License: _____ Phone: _____ Email: _____

Designated Representative Signature _____ Date _____

Designated Representative: _____ Company Name: _____

State Licensing Entity: _____ State Licensing/Registration Number: _____

Type of License: _____ Phone: _____ Email: _____

Designated Representative Signature _____ Date _____

Designated Representative: _____ Company Name: _____

State Licensing Entity: _____ State Licensing/Registration Number: _____

Type of License: _____ Phone: _____ Email: _____

Designated Representative Signature _____ Date _____

The following Support Staff do(es) not hold a Real Estate Agent/Broker's License nor an Attorney's License but is assisting the above identified licensee(s) with administrative functions:

Designated Support Staff: _____ Company Name: _____

Assistant For: _____
Designated Representative Signature _____ Date _____

Designated Support Staff: _____ Company Name: _____

Assistant For: _____
Designated Representative Signature _____ Date _____