



Mortgage Brokerage Lic. # 316176

CLIENT CONSENT FORM

This form authorizes _____ to release confidential mortgage information to my mortgage broker.

Once signed and submitted to _____, this authorization will be in place until such time as a separate form is received to cancel this authorization.

Please check one:

X to **authorize** the mortgage broker OR

to **cancel** the existing authorization of the mortgage broker below.

CLIENT IDENTIFICATION:

Name: _____

Mortgage Property: _____

Mortgage Reference No _____

Phone Number: _____

MORTGAGE BROKER IDENTIFICATION:

Broker Name: Daryl Rissling

Broker Phone Number: (306) 880-2528

AUTHORIZATION

Client Signature Date

Client Signature Date

517 4th Avenue North, Saskatoon, SK
Cell: (306) 880-2528
Daryl@isaskmortgage.ca