

## **Request for Authorized User on a Loan Account**

Loan Number:	
Property Address:	
This letter shall serve as written authorization to Guardian Savings Bank ("GSB") I/we, the mortgagor(s) on the above referenced loan (the "Loan"), do hereby authorize GSB to discuss any and all matters related to the Loan and/or property referenced above as well as provide any copies of statements, transaction histories, or year-end 1098's on my behalf with the individual(s) designated below until such time as I/we revoke such authorization in writing.	
Name of Authorized Party:	
Relationship:	Phone Number:
Name of Authorized Party:	
Relationship:	Phone Number:
In order for GSB to release any information to the parties listed above, this document must be signed, dated and returned to GSB for verification of signature(s) and processing.	
Borrower Signature	Date
Co-Borrower Signature	Date
Please submit this form to the following:	
Attn: Loan Servicing 2774 Blue Rock Rd.	customerservice@guardiansavingsbank.com  Questions? Call 513-842-0972 for Loan Servicing
Fax to 513-741-6255	



