



AUTHORIZATION TO RECEIVE AND CONVEY INFORMATION

(C.A.R. Form ARC, 4/04)

\_\_\_\_\_ ("Broker") is a licensed California real estate broker that provides real estate services on its own or through others working for Broker, including Broker's salespersons, broker-associates, employees, and assistants (collectively, "Associates"). Broker represents me as the [ ] Seller, [ ] Buyer in the sale/purchase of the following property, \_\_\_\_\_, or [ ] (if checked), not yet determined. I authorize Broker and its Associates to receive and convey information from and to the following persons or entities in connection with the sale/purchase of property described above.

- [ ] Current Insurance Provider: \_\_\_\_\_ Policy #: \_\_\_\_\_
[ ] Prospective Insurance Provider: \_\_\_\_\_
[ ] Current Lender: \_\_\_\_\_ Loan #: \_\_\_\_\_
[ ] Prospective Lender: \_\_\_\_\_
[ ] Appraiser: \_\_\_\_\_
[ ] Inspector(s): \_\_\_\_\_
[ ] Government Entity(ies): \_\_\_\_\_
[ ] Utility Provider: \_\_\_\_\_
[ ] Homeowners' Association: \_\_\_\_\_
[ ] Other: \_\_\_\_\_

[ ] Buyer [ ] Seller \_\_\_\_\_ Date \_\_\_\_\_
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

[ ] Buyer [ ] Seller \_\_\_\_\_ Date \_\_\_\_\_
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

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Reviewed by \_\_\_\_\_ Date \_\_\_\_\_

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