

## Broker consent form

This form authorizes CWB Optimum Mortgage to release confidential mortgage information to my mortgage broker and his/her assistants.

This authorization is valid for 120 day	ys. The purpose o	f this forn	n is (plea	se check one):		
To authorize a mortgage broker	to utilize this info	ormation	for a moi	rtgage consultation	or refinancing purposes	
To cancel the existing authorizat	tion of the mortga	age broke	r identifi	ed below		
Borrower information Borrower name(s):						
Mortgage property address:						
City:	Province: _		Postal code:			
Mortgage number:		Phone number:				
Authorization Consented to this day of		, 20	at		in the province of	
Borrower name(s):						
		Date:				
Signature:				Date:		
Broker information Broker name:						
Brokerage/company:						
Business address:						
City:	Province:			Postal cod	de:	
Phone number:	1	Email:				

Please remit to: <a href="mailto:customer.service@cwbank.com">customer.service@cwbank.com</a>

Note: this form will not be accepted unless all borrower(s) have signed.

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