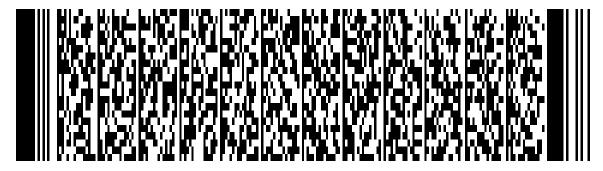
Fax Cover Sheet

Use this cover sheet when faxing documents back to your loan officer. Faxes that do not contain this cover sheet will not be processed or received by the intended recipient.

Fax # 800-704-0852

TO: Steve Brunett 800-704-0852

FROM: Amita Prajapati 33 Methwold Court Owings Mills, MD 21117

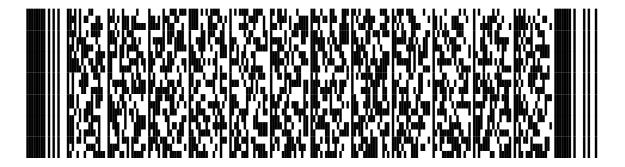


3011165901

{0440bb2e-9d4f-46a2-bc91-afad000f0e32}

Steve.Brunett@fitzgeraldfinancial.net

Amita Prajapati



Confidentiality Notice: The information contained in and transmitted with this communication is strictly confidential and is intended only for the use of the intended recipient. If you are not the intended recipient, you are hereby notified that any use of the information contained in or transmitted with the communication or dissemination, distribution, or copying of this communication is strictly prohibited by law. If you have received this communication in error, please immediately destroy the original message and any copy of it in your possession.

Authorization for the Social Security Administration (SSA) To Release Social Security Number (SSN) Verification

Printed Name: Amita Prajapati	Date of Septer 1982	Birth:	Social Security Number: 485-37-5121	
I want this information released because I am conducting seeking a mortgage loan from the company	the following busines	s transact	ion:	
Reason (s) for using CBSV: (Please select all that apply)				
Mortgage Service ☐ Banking Service ☐ Background Check ☐ License Requirement ☐ Credit Check ☐ Other				
with the following company ("the Company"):				
Company Name: TowneBank Mortgage				
Company Address: 8825 Stanford Blvd Suite 310, Colu	mbia, MD 21045			
I authorize the Social Security Administration to verify my if applicable, for the purpose I identified.	name and SSN to the	Company	and/or the Company's Agent,	
The name and address of the Company's Agent is: Pitch 8586 Potter Park Drive, STE108 Sarasota, FL 34238	Point Solutions Cor	o		
I am the individual to whom the Social Security number wa guardian of a legally incompetent adult. I declare and affir herein is true and correct. I acknowledge that if I make any Social Security records, I could be found guilty of a misde. This consent is valid only for 90 days from the date sign.	m under the penalty or representation that I meanor and fined up	of perjury to know is fa to \$5,000	that the information contained alse to obtain information from	
above. If you wish to change this timeframe, fill in the				
This consent is valid for 90 days from the date	signed (F	lease init	ial.)	
Signature:	[ate Signe	d:	
Relationship (if not the individual to whom the SSN was is	ssued):			
Contact information of individual signing authorization	n:			
Address: 9010 Town and Country Blvd Apt E				
City/State/Zip: Ellicott City, MD 21043				
Phone Number: <u>641-583-5597</u>				

Form **SSA-89** (04-2017) Page 2 of 2

Privacy Act Statement Collection and Use of Personal Information

Sections 205(a) and 1106 of the Social Security Act, as amended, allow us to collect this information. Furnishing us this information is voluntary. However, failing to provide all or part of the information may prevent us from releasing information to a designated company or company's agent.

We will use the information to verify your name and Social Security number (SSN). In addition, we may share this information in accordance with the Privacy Act and other Federal laws. For example, where authorized, we may use and disclose this information in computer matching programs, in which our records are compared with other records to establish or verify a person's eligibility for Federal benefit programs and for repayment of incorrect or delinquent debts under these programs.

A list of routine uses is available in our Privacy Act System of Records Notice (SORN) 60-0058, entitled Master Files of SSN Holders and SSN Applications. Additional information and a full listing of all our SORNs are available on our website at www.socialsecurity.gov/foia/bluebook.

Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the <u>Paperwork Reduction Act of 1995</u>. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 3 minutes to complete the form. You may send comments on our time estimate above to: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. **Send to this address only comments relating to our time estimate, not the completed form.**

TEAR OFF

NOTICE TO NUMBER HOLDER

The Company and/or its Agent have entered into an agreement with SSA that, among other things, includes restrictions on the further use and disclosure of SSA's verification of your SSN. To view a copy of the entire model agreement, visit HYPERLINK http://www.ssa.gov/cbsv/docs/

SampleUserAgreement.pdf http://www.ssa.gov/cbsv/docs/SampleUserAgreement.pdf

TowneBank Mortgage Right to Receive a Copy of an Appraisal Appraisal/Valuation Timing Notice

Date: 08/10/2017		Loan Number: 000207810
Name: Amita Prajapa	ti	
Current Address:	9010 Town and Cour Ellicott City, MD 210	
Subject Property Addr	ess: 33 Methwold Court Owings Mills, MD 2	1117
		erty's value and charge you for this appraisal. We will even if your loan does not close.
appraisals and other w	ritten valuations developed), we are required to provide you with a copy of all in conjunction with your application promptly upon g of your transaction, whichever is earlier.
our use in evaluating a upon by you or any oth any kind to any person	request for an extension of her person or entity. We may or entity, and we expressly	on with your loan application was prepared solely for f credit. Any written appraisal report should not be relied take no express or implied representation or warranty of y disclaim any liability to any person or entity with or an additional appraisal for your own use at your own
		ow certain professional appraisal standards and is not ide a copy of the written appraisal report directly to you.
	asible to do so. So that you	he appraisal report in a timely manner, there may be ur loan closing will not be delayed, you may waive the
report three (3) busine	ss days prior to your loan o	your scheduled closing date; providing the appraisal closing date may not be possible. You have the option of a to do so. Please check the appropriate box to indicate
☐ I waive th	e right to receive a copy of y ECOA. I understand that	equirement required under ECOA. Tany appraisal or written valuation within the timing t I will receive a copy of the appraisal/valuation on or
Borrower		Date
Borrower		Date



BORROWER'S CERTIFICATIONS REGARDING UNDISCLOSED DEBTS AT APPLICATION

Loan Number: 000207810 Borrower(s): Amita Prajapati

Property Address: 33 Methwold Court

City, State and Zip: Owings Mills, MD 21117

Thank you for choosing TowneBank Mortgage for your mortgage financing needs. It is important that we have an accurate representation of your financial commitments so we can determine if you qualify for your loan. **Each time someone requests your credit report, an inquiry is noted on the report.** The most common reason this occurs is in connection with an application for credit such as a mortgage loan, auto loan, credit card, etc.

We will continually monitor your credit activity during the loan application process, and may obtain a new credit report prior to close. New accounts and inquiries may impact your loan approval or loan closing as they can represent a change in your financial obligations.

All additional debt obligations that are expected to exist at or around the time of this transaction closing*, not included on the loan application, are provided below. Please attach the most recent statement (if available) for the debts listed below.

It is illegal for a person to knowingly withhold debt obligation information regarding a credit application to a financial institution. Withholding such information is bank fraud. Bank fraud is investigated by the Federal Bureau of Investigation (FBI) and is punishable by fines of up to \$1,000,000, or up to **30 years in federal prison**, or both.

* This in no way constitutes a loan comm	nitment of approval.	
Creditor	Total Obligation	Mthly Payment Amount
Creditor	Total Obligation	Mthly Payment Amount
I (we)acknowledge and certify that I (we) have		
of this transaction closing beyond what v document. I (we) further acknowledge a mortgage fraud, which is punishable by i Provide an explanation regarding any inc	nd certify that knowingly withholding incarceration in federal prison.	
Inquiring Creditor:		
Explanation of Inquiry:		
Inquiring Creditor:		
Explanation of Inquiry:		
Inquiring Creditor:		
Explanation of Inquiry:		
Borrower's Signature	Borrower's	Signature
Date	Date	



TowneBank Mortgage 8825 Stanford Blvd Suite 310 Columbia, MD 21045

Authorization for Release of Personal Information

At TowneBank Mortgage ("we" or "us"), we respect your privacy and strive to make the home loan process as simple and easy as possible.

To make certain that your home purchase goes smoothly, your real estate agent may request a copy of the Closing Disclosure that we will provide to you before closing your home loan. The Closing Disclosure will include certain personal information necessary to consummate your loan. By signing this Authorization for Release of Personal Information, you authorize us to provide your real estate agent with a copy of the Closing Disclosure. Such information may include (without limitation):

- Your name, property address, and property subdivision;
- Your loan terms, including the loan amount, interest rate, monthly principal & interest, and costs at closing;
- The identity of your lender, mortgage broker, real estate broker, and settlement agent;
- Taxes, assessments, and other adjustments;
- The sale price of your property; and
- The scheduled closing date and disbursement date.

You are not required to sign this Authorization. If you do not sign this Authorization, we only will use and share your non-public personal information as described in the TowneBank Privacy Notice.

Borrower	Date
Borrower	Date

