



Todd Cagnoni
Director
Community and Economic
Development Department

Authorization to Share Information

Several organizations are working together to assist you through the IHDA Homebuyer/Rehabilitation Program. This document allows for easier communication between the authorized parties listed below. It is your choice, as the applicant, to complete, sign, and submit this document as part of the application packet.

I/We, the undersigned, do here by acknowledge that I/We am/are giving a representative(s) of the City of Rockford the right to provide copies of my/our application and any documentation obtained to determine eligibility for their housing programs to the persons indicated below. I also give them the right to discuss, in detail, my/our application.

Loan Officer Name: _____

Bank Name: _____

Realtor Name: _____

Realtor Agency: _____

HomeStart Representative: Shelia Trevino

City of Rockford Representatives: Andrea Hinrichs, Housing Rehabilitation Specialist II
Lucia Soria-McFarlane, Housing Rehabilitation Specialist I
Glenn Lamb, Construction Specialist

Borrower Signature

Date

Co-Borrower Signature

Date