

**Consent to Social Security Administration's Release of
Social Security Number Verification**

Printed Name _____ SSN _____

Date of Birth _____

I consent to the Social Security Administration verifying my Social Security number to National Verification Service, acting on behalf of _____.

I understand that my consent allows no additional information from my Social Security records to be provided to National Verification Service and that the verification of my Social Security number will be used for Mortgage Application. I also understand that my Social Security number may not be used for any purpose other than the one stated above, including resale or redisclosure permitted by this consent is for review purpose to ensure that National Verification Service complies with SSA's consent requirements.

I am the individual to whom the Social Security number was issued or that person's legal guardian. I declare and affirm under penalty of perjury that the information contained herein is true and correct. I acknowledge that if I make any representation that I know is false to obtain information from Social Security records, I could be found guilty of a misdemeanor and be fined up to \$5,000.

Signature _____ Date Signed _____

This consent is valid only for 90 days from the date signed, unless indicated otherwise by the individual named above.

Contact information of individual signing authorization:

Address _____

Phone Number _____

If consent is signed other than by the individual named above, indicate relationship: