

This form authorizes CMLS Financial Ltd (“CMLS”) to release information on my CMLS Mortgage to my mortgage broker.

PLEASE RETURN THIS FORM TO:
 CMLS FINANCIAL LTD
 145 WELLINGTON STREET WEST, 4TH FLOOR
 TORONTO, ONTARIO M5J 1H8
 FAX: 1.888.226.5124
 SERVICE@CMLS.CA

The purpose of this form is to (please select one)

- Authorize** the mortgage broker (this authorization cancels any previous authorization)
- Cancel** the existing authorization of the mortgage broker

Client Information

Last Name		First Name		Last Name		First Name	
Last Name		First Name		Last Name		First Name	
Property address (street no. & name, apt. no.)			City		Province		Postal Code
Mortgage reference information				Phone Number ()			

Mortgage Broker Information

Broker Name		Phone Number ()	
Address (street no. & name, apt. no.)		City	
Province		Postal Code	

Client Authorization

This Client Consent Form is for mortgage information purpose ONLY, and does not authorize my broker to request or complete any changes to my mortgage on my behalf.

The information to be provided on my CMLS mortgage is limited to the following:

- Information regarding the Mortgage interest rate and how interest is charged
- Mortgage payment frequency, mortgage payment due date and payment amount
- Principal balance
- Mortgage early prepayment privileges
- Terms and features (privileges) of the mortgage
- Whether CMLS remits property taxes on my behalf
- Information regarding early payout penalties

Once signed and submitted to CMLS at the above address, this authorization will be in place until such time as a separate form is received to cancel this authorization.

_____	_____	_____	_____
Client Signature	Date (mm/dd/yyyy)	Client Signature	Date (mm/dd/yyyy)
_____	_____	_____	_____
Client Signature	Date (mm/dd/yyyy)	Client Signature	Date (mm/dd/yyyy)