



Please complete, sign/date, and return this letter to us so that we can serve as your loan application packager.

WAIVER OF PROVISIONS TO THE PRIVACY ACT OF 1974

To serve as your advocate with the Agency, we need to be kept informed of the Agency's processing of your application and we may need access to items directly obtained by the Agency. By signing below, you authorize the Agency to release to and discuss with [insert name of organization and the name of the intermediary if present] any information we may seek or request from the Agency's records concerning your application for Agency assistance. I/we acknowledge these facts and confirm my/our desire to work with LACDC Lake Area Community Development Corporation

I/we received this letter on the _____ of _____ 2022.

Potential Applicant Name/Signature/Date (spell out full name and then sign)

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