



Fax this form along with the Pre-Qualification
Form to Gold Quest Group, LLC
713-983-4623(Please include cover letter)

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

The undersigned has authorized Gold Quest Group to verify references and obtain information in order to consider and process their application. The undersigned also has given Gold Quest Group authorization to periodically check and update information.

The undersigned hereby authorizes you to verify and to give Gold Quest Group any information requested in order to assist in the consideration and processing of the application.

The undersigned has authorized Gold Quest Group to reproduce this form as many times as necessary in order to obtain and verify the necessary information. Therefore, you are hereby authorized to honor a photocopy of this executed authorization and to treat such photocopy as an original.

Company Name _____

Borrower _____ Social Security Number _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____ Email _____

Signature _____ Date _____