

TEXAS ASSOCIATION OF REALTORS®

AUTHORIZATION TO FURNISH TILA-RESPA INTEGRATED DISCLOSURES

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To: Lender, Title Company, Escrow A	gent, and/or their representatives
RE:	(Property)
I, an exclusive listing/representation ag	
Name of Broker:	
Address:	
City, State, Zip:	
Phone:	Fax:
E-Mail:	
Name of Broker's authorized age	nt, if applicable:
TREC License Number of Broke	's authorized agent, if applicable:
	nd furnish a copy of any and all loan estimates, closing disclosures or d in relation to the closing of the real estate transaction involving the or Broker's authorized agent.
Signature of Client	Date
Signature of Client	Date

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