

Mississippi Home Corporation

Authorization to Release

Owner Information

Owner's Name: _____ TIN: _____

Contact Person: _____

Owner's Address: _____

City, State and Zip: _____

Telephone #: _____ Fax #: _____ Email: _____

Management Company/ Owner's Representative

Management Co. Name: _____ TIN: _____

Contact Person: _____

Address: _____

(address in which ALL copies should be forwarded)

City, State and Zip: _____

Telephone #: _____ Fax #: _____ Email: _____

Development Information *(To list additional developments, please attach a separate sheet.)*

Development Name	Development Number	City

Effective _____ (mm/dd/yy), I, _____, the owner of the development(s) noted herein, hereby authorize the aforementioned management company/owner's representative to receive copies of all correspondence regarding the compliance status of the developments listed herein*. This authorization shall remain in effect until written cancellation is received/submitted by either Mississippi Home Corporation or myself.

Owner's Name (Signature)

Date

*Disclaimer: Please be advised that although MHC agrees to forward copies of all correspondence associated with the developments noted herein, the owner is responsible for ensuring that all forms and documents related to compliance are submitted as required. MHC's acceptance of this authorization shall in no way be viewed as a waiver of an owner's responsibility under the applicable program's rules and regulations.