

# MAINE AUTO CREDIT

## THIRD PARTY AUTHORIZATION FORM

I/We, \_\_\_\_\_, hereby authorize and request Maine Auto Credit to share, discuss, and/ or furnish non-public, private and confidential information with the person(s) listed below as it relates to a credit application and/or any subsequent retail sale finance agreement and all of its related servicing. Account number \_\_\_\_\_.

### Authorized Third Party

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Mailing Address  
\_\_\_\_\_  
City, State ZIP Code  
\_\_\_\_\_  
Telephone Number  
\_\_\_\_\_  
ME License or ID Number  
(Copy of Photo ID Attached)

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Mailing Address  
\_\_\_\_\_  
City, State ZIP Code  
\_\_\_\_\_  
Telephone Number  
\_\_\_\_\_  
ME License or ID Number  
(Copy of Photo ID Attached)

My/ Our signature(s) below indicate(s) that I/We fully understand that the authorization has been granted to the individual(s) listed on this form for the purposes stated above. This authorization shall be in effect from the date indicated below and will remain in force unless and until Maine Auto Credit receives written revocation.

\_\_\_\_\_  
Signature of Borrower

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Co- Borrower

\_\_\_\_\_  
Date