



## CCPA AUTHORIZATION FORM

### Third Party Information:

Company: \_\_\_\_\_

Name: \_\_\_\_\_

Position/Title: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

The Undersigned hereby authorize the following:

I/We ("Requestor") hereby certify that \_\_\_\_\_ ("Third Party") is authorized to submit on my/our behalf, a verified consumer request, as specified in California Consumer Privacy Act of 2018 ("CCPA"). I / We also certify that the Third Party is a consumer or business that is licensed with the California Secretary of State and is representing me / us for all matters concerning the CCPA request this authorization form is attached to when submitted to Acra Lending.

I / We hereby authorize Acra Lending to release to the Third Party any information and / or documents relative to the CCPA request that this authorization form is attached to at submission to Acra Lending.

### Third Party Consent:

I/We understand that:

- This authorization will be valid for ninety (90) days from the below execution date; or if not dated, from the date of Acra Lending's receipt of this authorization form.
- This authorization may be revoked at any time by providing written notice to Acra Lending.

Loan No.: \_\_\_\_\_

Property Address: \_\_\_\_\_

\_\_\_\_\_  
Requestor (1) Signature

\_\_\_\_\_  
Requestor (2) Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

Date: \_\_\_\_\_

Date: \_\_\_\_\_

By submitting this Form, you hereby confirm and declare under the penalty of perjury of the State of California that you have been authorized by a California resident requesting to exercise their rights under the California Consumer Privacy Act of 2018 as a third party licensed with the California Secretary of State and that the information provided above is true and correct.