



## THIRD PARTY AUTHORIZATION REVOCATION FORM

**Please complete this form in its entirety.** To protect the privacy of our customers, Carver Federal Savings Bank (CFSB) requires written consent from the borrower to revoke authorization to any previously authorized third parties.

### Step 1: Your Contact Information

Loan Number: \_\_\_\_\_  
Borrower Name: \_\_\_\_\_ Co-Borrower: \_\_\_\_\_  
Primary Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Property Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

### Step 2: The Authorized Third Party's Contact Information

Authorized Party or Organization: \_\_\_\_\_

### Step 3: Your Signature

**Acknowledgement:** I understand my personal and/or financial information may have been disclosed to this third-party individual in reliance upon an authorization given previously by me. I further understand that this revocation does not apply retroactively and will not affect any actions taken prior to receipt of this request.

\_\_\_\_\_  
*Borrower* Last four digits of social security number: \_\_\_\_\_

\_\_\_\_\_  
*Co-Borrower* Last four digits of social security number: \_\_\_\_\_

### Step 4: Returning the Form

Please return the completed form to Carver via the following options:

**Email:** [loanoperations@carverbank.com](mailto:loanoperations@carverbank.com)

**Mailing Address:** Carver Federal Savings Bank  
Attn: Loan Operations  
1825 Park Avenue – 7<sup>th</sup> Floor  
New York, NY 10035

**Fax:** 212-426-6155