

Applicant/Business/Entity Name: _____

AUTHORIZATION FOR RELEASE OF INFORMATION

I (We) hereby supplement the Loan Application of _____, 20____, and agree as follows:

1. Said application, this application, and all support information is the property of:

MURRAY COUNTY ECONOMIC DEVELOPMENT REVOLVING LOAN FUND

Hereafter referred to as Lender, at its office at:

**PO BOX 57
SLAYTON MN 56172-0057**

2. Lender is authorized to make credit checks or inquiries concerning my (our) creditworthiness, credit standing, credit capacity, character, general reputation, personal characteristics, and matters relating to assets, liabilities, and reference on said application and support information, any subsequent application and support information; or any loan servicing request or action on any loan resulting from said applications.
3. Creditors, including but not limited to credit reporting agencies, state and national banks, Federal Land Banks, Production Credit Associations, and the Farmers Home Administration and others, are hereby authorized to disclose to Lender any information relative to any of my (our) loans, accounts, purchases, other financial transactions, production or marketing information or other pertinent information, whether past, present, or future, with said creditors;
4. Lender is authorized to share with credit reporting agencies and creditors doing business, or who may do business with me (us), information regarding this extension of credit, and subsequent transactions or loan servicing actions resulting from any extension of credit, and my (our) general credit history;
5. ASCS, SCS, and other county, state, and federal agencies are authorized to make available all aerial maps, land descriptions, water and soil data, commensurate or base property qualifications, grazing survey data, crop yield or production data, and other pertinent data covering any real estate owned, rented, and/or optioned by me (us).
6. Photocopies of this authorization may be presented to and relied upon by my (our) creditors and others as evidence of my (our) authorization to release information to the Lender.

Applicant	Signature	Date
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Applicant	Signature	Date
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