



GRIFFIN FUNDING

M O R T G A G E B A N K E R S

Validation of your identity is critical to ensuring the protection of your personal information. Depending on the response to your request, Griffin Funding, Inc. may require you to provide proof of identity before it can be fulfilled. If you are a third party authorized agent, we will require evidence from the consumer that you have consent to make this request. We will respond to your request within 45 days.

Are you requesting this information for yourself or on behalf of another person? If on behalf of someone else, please list their name.

- Yourself
- Another person _____

What is your relationship with Griffin Financial, Inc.?

- Subscriber
- Applicant
- Borrower
- 3rd party authorized agent

What is your request type?

- Remove access to my data
- Delete my data
- Do not sell my data

I declare under penalty of perjury that the forgoing is true and correct and that I am the consumer or authorized agent whose personal information is the subject of this request.

Print name _____

Signature _____

Email address _____

Phone number _____

Mailing address _____

Email the completed form to compliance@griffinfunding.com or mail to:

Griffin Funding, Inc.
Attn: Compliance
2245 5th Ave, Ste 300
San Diego, CA 92101



Griffin Funding, Inc.
BRE: 01943169 | NMLS#: 1120111
2445 5th Ave Ste 300 San Diego, CA 92101
P: 800.527.5910 | F: 888.721.0003