

**All American Mortgage Lending, Inc.
Credit Card Authorization**

Date: _____

Borrower 1 _____

Borrower 2 _____

For your convenience, we will accept payment via Visa, MasterCard and Discover for payment of the following fee.

- Loan Application Fee \$ 320.00

If you prefer this method of payment, print, complete and fax this form to the number below.

I hereby authorize All American Mortgage Lending, Inc. to charge the above mentioned application fee's to my credit account for which I am a cardholder.

Acct. Type (Check one)

Visa  MasterCard  Discover  Expiration Date ____/____/____

Account Number: _____

 Borrower Name (Please Print)

_____/_____
Borrower Signature Date

Cardholder's Billing Address:

Address: _____

City/State/Zip _____

All American Mortgage Lending, Inc.
Attn: Sales
7420 Unity Avenue North, Suite 308
Brooklyn Park, MN 55443
Fax: 775-924-2024 Phone: 763-560-5815
e-mail: sales@allamericanlendinginc.com

To complete this form you may need the assistance of an All American Mortgage Lending Specialist. Please call 763-560-5815 during regular business hours (10:00AM – 6:00 PM CST) for assistance.