

**MI Company Name:** \_\_\_\_\_

**NOTP/ MSP Number:** \_\_\_\_\_

Please provide the name and address of the individual who should receive all of your user login names and passwords. This person will also be responsible for all user additions/deletions to this account.

<b>Contact Name:</b>	
<b>Title:</b>	
<b>Address:</b>	
<b>City/State/Zip:</b>	
<b>Telephone:</b>	
<b>E-mail:</b>	

<b>Add</b>	<b>Delete</b>	<b>USER NAME AND EMAIL ADDRESS:</b>
<input type="checkbox"/>	<input type="checkbox"/>	<b>User Name:</b> _____ <b>Email:</b> _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>User Name:</b> _____ <b>Email:</b> _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>User Name:</b> _____ <b>Email:</b> _____
<input type="checkbox"/>	<input type="checkbox"/>	<b>User Name:</b> _____ <b>Email:</b> _____

**Certification and Agreement:**

This Form must be signed by the Authorizing Entity's duly authorized representative who is authorized to (a) submit requests to add, modify, or disable access for the Authorizing Entity's Authorized Users, and (b) identify the specific assigned authorized user role(s) for each Authorized User.

As a duly authorized representative of the above-identified Authorizing Entity, I hereby certify and agree that (1) by signing my name below, I intend for me and the Authorizing Entity to be bound by my signature on this Form, which shall be as binding and enforceable, (2) the information provided in this Form, including my name and title set forth immediately below, is true, complete and accurate, (3) as required under the Freddie Mac *Single-Family Seller/Service Guide* ("Guide"), the Authorizing Entity shall protect the Authentication Credentials used to access the MI Access System tool, (4) this completed and signed Form is a Purchase Document and supersedes any previously signed Forms, and (5) access to and use of the MI Access System tool is governed by the terms and conditions of the System-Specific License set forth in Section 2404.2(l) and the Master System License set forth in Guide Section 2401.1; capitalized terms not otherwise defined on this Form shall have the meaning ascribed to such terms in Guide Chapter 2401 and the Guide Glossary.

**Authorized Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please Email completed form to: [CSA\\_Operations@Freddiemac.com](mailto:CSA_Operations@Freddiemac.com)**