



Do Not Sell My Personal Information

Please complete appropriate section(s) below, then “save as” using the following format:

“Last Name Do Not Sell MMDDYY” and email to privacy@solidifi.com

File Name Example: *Smith Do Not Sell 01-01-20*

Date of Request:

Please use format: MM-DD-YY

Requestor Contact Information:

Name(s) (Last, First)

Property Address (Street, City, State, Zip)

Contact Address (if different from Property Address)

Contact Phone Number

Consumer Name if different from Requestor

Order Information:

Service Type (Appraisal, Title, etc.)

Order Number(s) (if applicable)

Type of Request:

Do Not Sell My Personal Information

Indicate any other pertinent request information below:

For Internal Use

Advise requestor that this form will be sent to the Compliance Team on their behalf.

Name/Title of person completing form: _____

Management Review Name/Title: _____