

PAYOFF AUTHORIZATION REQUEST

Proper	Property Address:				
Third Party Authorizati	on - Seller(s) please com	plete the following	boxed information.		
1st Mortgage	2nd Mortgage Home Equ		Line of Credit	Land Contract	NONE
LENDER:			DATE:		
-					
ADDRESS:			LOAN #:		
CITY/STATE/ZIP:			PHONE:		
BORROWER'S NAME(S):					
PROPERTY ADDRESS:					
Borrower Signatures:					
			Last 4 of SS#		
Signature		Date	Last 4 of SS#		
Signature		Date			
ATTN: LOAN PAYOFF DEI	PARTMENT				
The above property has	been sold and the loan v	will be paid off. Yo	ou are hereby authori	ized to discuss and/o	or furnish anv
and all information regar		-	-		_
information:	3		0 <i>n</i>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Your mortgage will	be paid off				
Your mortgage will	be assumed. Please for	ward Assumption	Application Package.		
Payoff Figures as	of	with a daily rate.			

Equity line payoff figures as of ______ with a daily rate. Please block the account once the

Checks/Cards have been destroyed. Title WRX Agency will be paying property taxes due at closing. Please freeze the tax

Payoff Figures good for 30 days, with applicable daily rate.

payoff letter is sent. Freeze any future advance and close account upon receipt of full payment.

Page 1 of 1

escrow to prevent duplicate payments.