

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

I/We hereby authorize you to release payoff information to Title Company/Real Estate Agent/Mortgage Broker in conjunction with the sale/refinance of my real estate located at

A photographic or facsimile copy of this authorization (being a valid copy of the signature(s) of the undersigned) may be deemed the equivalent of the original and may be used as a duplicate original.

Your prompt reply will expedite the Real Estate closing:

Signature of Property Owner Date

Signature of Property Owner Date

Printed name of Property Owner

Printed name of Property Owner

Social Security Number

Social Security Number

First Mortgage Holder

Second Mortgage Holder

Name of Bank

Name of Bank

Account Number

Account Number

Telephone No. to obtain payoff

Telephone No. to obtain payoff