MORTGAGE PAYOFF REQUEST AND AUTHORIZATION FOR RELEASE OF INFORMATION

Borrower:	
Borrower SSN:	
Property address:	
1 st Mortgage Bank Name:	
Mortgage Company Phone #:	
Loan #:	
2 nd Mortgage Bank Name:	
Mortgage Company Phone #:	
Loan #:	
Good Thru date:	

I/We hereby authorize and request that you, the lender, release information to **The Carr Law Group and its subsidiary, Carr and Gibbs, Attorneys at Law, PC**, for any and all use in connection with the sale or refinance of my/our property listed above and with regard to any and all loans secured by said property.

Please be advised that this letter authorizes you to freeze the referenced credit line upon issuance of your payoff statement demand. If you require further authorization, please contact the undersigned immediately.

Please either fax or email the requested payoff demand letters to (706) 754-7145 or email to <u>nichole@carrandgibbs.com</u> and <u>lori@carrandgibbs.com</u>. Please call us at (706) 754-9231 if you should have any questions.

Signature

Signature

Printed Name

Printed Name

Date:

Date:

NOTE: Most lenders do not accept electronic signatures for this form, therefore, esignatures will not be accepted.