

PAYOFF REQUEST LETTER

Date: _____

To: _____ (Lender)

ATTN: Payoff Department

Via Fax: # _____

Re: Loan No. _____

Borrower(s) Name: _____ SSN: _____

Borrower(s) Name: _____ SSN: _____

Borrower(s) Contact Number _____

Property Address: _____

Dear Sir/Madam:

Please accept this as my authorization to issue a payoff statement to the law office of Roach, Geiger & Caudill through an effective date of _____. Please include a per diem interest amount in the statement.

Please fax this information to 770-720-4646 as soon as possible.

PLEASE NOTE: IF THIS IS AN EQUITY LINE OR OTHER OPEN ENDED ACCOUNT, NO ADDITIONAL FUNDS SHOULD BE ADVANCED AND THE ACCOUNT IS TO BE CLOSED. IF ADDITIONAL DOCUMENTATION IS TO BE SIGNED, PLEASE FAX THE NECESSARY DOCUMENTS TO THE ABOVE NUMBER.

Thank you in advance for your assistance in this matter.

Sincerely,

(Borrower)

(Borrower)

