



PAYOFF REQUEST

Date:

Company:

Attn.: Payoff Department

Phone:

Fax:

Please fax a payoff statement as soon as possible to:

Select Title Insurance Agency, Inc.,

Attn: .Escrow Dept: Shanna

Fax: (801) 492-5021

Our file no.:

(Please reference our file number on payoff statement.)

Please make payoff good through:

Borrower's name:

Loan No.:

Property:

Social Security #:

I / We hereby authorize you to release the payoff information requested to Select Title Insurance.

Thank you for your help in this matter. If you have any questions, problems, or concerns please call their office at the number listed number below.

Sincerely,

Phone (801) 492-5020

Fax (801) 492-5021

170 S. Interstate Plaza Ste 150, Lehi, UT 84043