

Three Robinson Plaza
Suite 220
Pittsburgh, PA 15205



Phone: 412-275-3297
Fax: 412-275-3344
www.palandtitles.com

Mortgage Payoff Request / Authorization to Release Information

Date of Request: _____

Homeowner(s) / Mortgagor(s): _____

Property Address: _____

First Mortgage Lender: _____

Loan Number: _____

Second Mortgage Lender: _____

Loan Number: _____

Estimated Closing Date: _____ *

*Please include a per diem rate of interest in your loan payoff

Please fax the above statement to the attention of Connie Wilson at 412-275-3344 or by email at cwilson@palandtitles.com

I/We hereby authorize you to release the above information to Pennsylvania Land Titles (a copy of this form may be used as an original).

Homeowner's/Mortgagor's Signature Date

Homeowner's/Mortgagor's Signature Date

Social Security Number

Social Security Number

