

Title One, Inc. Quality, Service, Expertise Est. 1992

MORTGAGE INFORMATION RELEASE AUTHORIZATION

| To Lender | Date |
|---|--|
| C/O Mortgage Servicing Department | |
| Address: | |
| Re: Property located at: | |
| Loan No | |
| The above property has been Listed/Sold; On Land Contract Purchaser will assume your mortgage Your mortgage will be paid off | |
| You are hereby authorized and requested to furnish the follow Payoff figures as of | _ with per diem. te, Prepayment Penalty, Escrow Balance |
| When forwarding above, please do so in duplicate and refer to our file numb | er 7-712364 |

| Fax Information To: | Title One, Inc. |
|---------------------|---|
| | 33300 Five Mile Road, Suite 100, 104, 201 |
| | Livonia, MI 48154 |
| | Phone 734-427-8000 |
| | Fax: |
| | Attention: |

You are hereby authorized to release the above information as requested. Please retain this authorization in the mortgage file so the closing agent can continue to receive updated information on this mortgage.

Signature

Social Security Number

Social Security Number

NOTE: THERE MAY BE A FEE CHARGED FROM THE MORTGAGE COMPANY TO THE MORTGAGEE FOR A FIXED STATEMENT. THIS FEE WILL BE A PART OF THE TOTAL PAYOFF TO LENDER.