



Authorization and Release

Date: _____

Mortgage Payoff for property at: _____

Social Security Number: _____

Name of Lender: _____

Phone Number/Email for Lender: _____

Account # _____

You are hereby authorized and directed to furnish and provide a payoff statement on the above referenced mortgage loan balance to real estate closing attorney and/or its agents:

The Cloud Law Firm
1467 Ebenezer Rd.
Rock Hill, SC 29732
Office-(803) 693-5721 Fax-(803) 721-3822
admin@cloudlawsc.com

SELLER SIGNATURE: _____

PRINT NAME: _____