24010 Lyons Avenue Newhall, California, 91321



(661) 259-3450 • (818) 367-2283 Fax: (661) 259-4063

RE: Escrow No.:		Date:
Property:		
	INFORMATION	REQUEST
following information on your		nder(s) or homeowner's association, please provide us with the complete information on your accounts, as some take up to 30 as possible.
Applicable Regulation requir Escrow Holder. A delay in re	es authorization in writing from you eturning this signed and completed fo	u before a lender can release any payoff information to an rm could delay the close of this escrow.
FIRST TRUST DEED		
Lender Name		
Address	<del></del>	
Phone Number		
Loan Number		
SECOND TRUST DEED	)	
Lender Name		
Address		
Phone Number		
Loan Number	Line (Control (Value (N.))	
	Line of Credit? (Yes) or (No)	
ADDITIONAL LIEN		
Lender Name		
Address		
Phone Number		
Loan Number		
HOMEOWNER'S ASSO	OCIATION (if applicable)	
Association Name	CENTION (II applicable)	
Management Co.		
Address		
Phone Number		
Account Number		<u> </u>
companies; and our authorization Statement Fees, Transfer Fees,	on to pay from funds due us at the clos Late Fees, Prepayment Penalties, Impor	statements; to comply with the instructions of the above named se of escrow said companies' fees, including, but not limited to: and Account Shortages without our further approval.
		<u></u>
		<del></del>
		Effective Date:
SELLER		