

**Law Office of Jane K. Innamorati, Esq.**  
**45 Sterling Street, Ste. 32, W. Boylston, MA 01583**  
**Telephone: (508) 835-4384 Fax: (508) 835-4386**

MORTGAGE PAYOFF REQUEST AUTHORIZATION

To: \_\_\_\_\_  
(Bank or Lending Institution)

Lender's Address: \_\_\_\_\_  
\_\_\_\_\_

Lender's Telephone No.: \_\_\_\_\_

Account No.: \_\_\_\_\_

Re: \_\_\_\_\_  
(Address of Mortgaged Property)

Anticipated Payoff Date: \_\_\_\_\_  
*(To be filled in by attorney)*

Our File No:

Please consider this a formal authorization and request for pay-off figures relating to the above referenced mortgage. Please provide the mortgage pay-off figures directly to:

Jane K. Innamorati, Esq.  
45 Sterling Street, Ste. 32, W. Boylston, MA 01853  
Telephone: (508) 835-4384 Fax: (508) 835-4386

If possible, please fax the figures directly to Jane K. Innamorati at (508) 835-4386.

Thank you.

\_\_\_\_\_  
Account Holder Signature

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Account Holder Signature

\_\_\_\_\_  
Social Security Number