



9425 Sunset Drive, Suite 124, Miami, Florida 33173  
Phone 305-271-0100 Fax 305-726-0096 [info@theclosingcompany.net](mailto:info@theclosingcompany.net)

**Authorization to Release Payoff Information**

Borrower(s) name: \_\_\_\_\_

Property Address: \_\_\_\_\_

\_\_\_\_\_

Lender name: \_\_\_\_\_

Loan# \_\_\_\_\_

Borrower social security number: \_\_\_\_\_

Estimated loan balance: \$ \_\_\_\_\_

The Closing Company, Inc file#: \_\_\_\_\_

I, \_\_\_\_\_, hereby authorize you to release payoff information to any authorized representative of **The Closing Company, Inc.** in order to close this transaction. Please send payoff good for 30 days from the request date. Please send to [closings@theclosingcompany.net](mailto:closings@theclosingcompany.net) or fax to 305-726-0096.

\_\_\_\_\_  
Borrower signature(s)

\_\_\_\_\_  
Print

\_\_\_\_\_  
Date

If you have any questions, please contact us at (305) 271-0100.

Sincerely,

Johanna Merino  
Escrow Agent & Lic. Title Agent & Florida Registered Paralegal