



25084 State Road 35, Siren, Wisconsin 54872
Phone: (715) 349-2269 Fax: (715) 349-7604
Office@BurnettCountyAbstract.com www.BCATitleServices.com

Mortgage Payoff Request

Attn: Payoff Department

Lender: Please send mortgage payoff to Burnett County Abstract via email at office@burnettcountyabstract.com or by fax (715-349-7604) Thank you.

Mortgage Payoff good through date: _____ *Please include per diem amount in Mortgage Payoff.*

Please include all amounts due pursuant to a forbearance agreement or other payment relief agreement including and should specially identify the amount of deferred principal, interest, and fees accrued during the forbearance period.

If the entity servicing any deferred amount is not the same as the lender's servicer, please provide the name of the servicing entity: _____

Customer: Please complete the information below, sign and date the form, and return it to us.

Lender Name: _____

For Account Number: _____

Has Mortgage been subject to forbearance or other payment relief agreement? Yes___ No _____

Property Address: _____

I/we, the undersigned, hereby authorize Burnett County Abstract to receive on our behalf the above requested Mortgage Payoff information and to speak to Lender regarding Satisfaction of the Mortgage referred to herein.

Customer Signature: _____ Date: _____

Customer Name: _____

Social Security #: _____ Phone #: _____

Customer Signature: _____ Date: _____

Customer Name: _____

Social Security #: _____ Phone #: _____