

## Home Equity/Home Improvement Payoff Request

Please use this form to request a Home Equity / Home Improvement Loan Payoff. To speed the processing of your request, please follow these steps:

- Complete the Payoff Request Form in its entirety. UNSIGNED or incomplete requests cannot be processed.
- Send your completed Payoff Request Form to Austin Telco in one of two ways:
  - o Fax your completed form to: 512-302-3333 or 800-252-1410 or
  - o Email your completed form to: homeequity@atfcu.org

Once you have submitted your completed form, please allow three business days for the payoff figures to be computed and returned to you. Phone requests cannot be processed.

| Payoff Contact Information   |  |  |       |
|--|--|--|-------|
| Requestor's Name:  |  | Law Firm/Settlement Agent:   |       |
|  |  |  |       |
| Send Payoff by:   Fax   Email  |  |  |       |
| Borrower Information   |  |  |       |
|  |  |  |       |
| Borrower's Name: Account Number:   |  |  |       |
| Property Address:  |  |  |       |
| Payoff Date:   |  | Please note: payoff date may not be more than 30 days in the future. |       |
| Borrower Request for Payoff  |  |  |       |
| I,, certify that I am the person whose name appears below and  |  |  |       |
| that I am a borrower on the following account(s):  |  |  |       |
|  |  |  |       |
| Please Print Name:   |  |  |       |
| Signad   |  |  | Date: |
| Signed:  |  |  | Date. |
| Borrower Authorization to Provide Information to a Third Party   |  |  |       |
| I,, certify that I am the person whose name appears below and  |  |  |       |
| that I am a borrower on the following account(s):  |  |  |       |
| I hereby authorize the following person(s) and/or company to obtain a payoff statement for any of the above accounts:  |  |  |       |
| Individual/Company Name:   |  |  |       |
| muvidual/company Name.   |  |  |       |
| I authorize Austin Telco Federal Credit Union to release information to the contact identified above. This authorization will remain in effect for 30 days. I understand that I may revoke this authorization at any time before the payoff information is disclosed, in writing, by mail, fax, or e-mail. I further agree to release Austin Telco Federal Credit Union from any liability for providing this information. |  |  |       |
| Please Print Name:   |  |  |       |
|  |  |  |       |
| Signed:  |  |  | Date: |

Print Reset