

Authorization to Release Information

Dear Lien Holder:

I/We hereby authorize National Tax Assistance, LLC to release to _____ information including payoff and reinstatement information that they may require for the purpose of a payoff balance.

My property is located at _____

Owner 1 Name:	_____	Owner 2 Name:	_____
Signature:	_____	Signature:	_____
Date:	_____	Date:	_____
Social Security No.:	_____	Social Security No.:	_____
Drivers License:	_____	Drivers License:	_____
Phone:	_____	Phone:	_____

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Account Information

<u>Account 1:</u>	_____	<u>Account 2:</u>	_____
Account or Loan #:	_____	Account or Loan #:	_____
Contact:	_____	Contact:	_____
Phone:	_____	Phone:	_____
Fax:	_____	Fax:	_____
Borrower Name:	_____	Borrower Name:	_____
Borrower SSN:	_____	Borrower SSN:	_____
Borrower Name:	_____	Borrower Name:	_____
Borrower SSN:	_____	Borrower SSN:	_____