



The Law Office of Matthew McCrystal, PLLC

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AUTHORIZATION TO RELEASE INFORMATION

Lender 1:
Loan #

Lender 2:
Loan #

Property Address: _____

I/We authorize individuals and institutions named above to provide The Law Office of Matthew McCrystal (Attorney Matt McCrystal, and Paralegal Christina Wigard), any and all information and documentation requested in order to assist The Law Office of Matthew McCrystal in obtaining loan and payoff information for loans I owe to said Lender(s). Such information shall include, but is not limited to: account balance, payment information and verbal and written payoff information, information regarding the satisfaction and release of any lien of record, pending foreclosure or bankruptcy proceedings, or short sale negotiations. **The Law Office of Matthew McCrystal, PLLC is authorized to request that an open ended or equity line account be blocked and closed.**

I understand that the lender may charge a fee to my account for a faxed written payoff statement.

Lender is asked to forward any requested information in a prompt manner. Thank you for your cooperation in this matter.

PLEASE NOTE: A copy of this authorization may be accepted as an original.

Dated: _____

Signature:
SS #

Signature:
SS #

[please *do not* docusign]