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**LIEN PAYOFF REQUEST FORM**

Title Company Name/Law Firm: \_\_\_\_\_

Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_ Date: \_\_\_\_\_

Requested by:	
Email:	
File No:	
Property Address:	
Folio No:	
1 <sup>st</sup> Lien/Case No:	
1 <sup>st</sup> Lien Type:	
1 <sup>st</sup> OR Bk/Pg:	
2 <sup>nd</sup> Lien/Case No:	
2 <sup>nd</sup> Lien Type:	
2 <sup>nd</sup> OR BK/Pg:	
Special Instructions:	

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Date