

Refinancer Information Form File No. - 16-306M

RETURN TO: Monument Title Company, Inc.
700 S. Washington Street, #216
Alexandria, Virginia 22314
Fax - (703) 548-8667 or preclosing@monument-title.com

Your Name(s) as they appear on your photo identification:

Marital Status _____

Email _____

Social Security Number(s)-(necessary to obtain payoff statement):

Day Time Phone Number _____

Current mortgage company (please include any equity lines of credit)

Name(s) _____

Address _____

Loan Number _____

Phone Number _____

Current mortgage company (please include any equity lines of credit)

Name(s) _____

Address _____

Loan Number _____

Phone Number _____

IF ANY REFINANCER IS NOT PLANNING TO ATTEND CLOSING, PLEASE CONTACT OUR OFFICE IMMEDIATELY! If a Power of Attorney is being used for closing, it must be approved by the underwriter and lender. It is imperative that you contact us ASAP to insure this will not delay your closing.

I hereby authorize Monument Title Company to obtain the above referenced pay-off information and request that any home equity account(s) attached to the property be closed.

Signature

Date