

## **AUTHORIZATION TO RELEASE PAYOFF STATEMENT**

By signing below, I,	acknowledge that I am
designated to execute this Authorization to Release Payoff on behalf of the	company listed below and
that I hereby authorize Cooperative Business Services, LLC ("CBS"), the services	ricer of my commercial loan,
to release a payoff statement on my current loan(s) to either myself and/or	r the additional party listed
below. I understand CBS maintains the right to request additional informat	
payoff information to myself or the additional party listed below. I acknowled	edge it may take up to 24
hours to receive the requested payoff.	
Loan Number:	
Loan Name:	
Person Requesting:	
Borrower Signature:	
Date:	
Date of Payoff Letter:	
I request that CBS send this payoff to the additional party listed below:	
Name:	
Company:	
Email Address:	
Fax:	