Seller Authorization Form



Form Completion Instructions: Please complete this form in its entirety and promptly return to your contact at The Land Group Real Estate Title & Closings. NOTE: this form is electronically fillable for your convenience; however, wet signatures are required.

Seller Information		
Seller Name:		
Property Address:		
Lender Information		
Lender/Servicer:		
Loan Number:		
Lender Contact Name:		
Lender Contact Phone:		
Second Lender/Servicer:		
Second Loan Number:		
Please accept this form to release any information regarding a payoff, lien, or other related information to The Land Group Real Estate Title & Closings for the aforementioned address.		
Thank You		
Signature	Date	Last Four of SSN
Signature	Date	Last Four of SSN