



Authorization for Mortgage and/or Equity Loan Payoff

Please complete all requested information (print or type) and **FAX to 425-460-3860**

Or Mail to Qualstar Credit Union | P.O. Box 96730 Bellevue, WA 98009

Member Name _____ Date _____

I/We, Authorize Qualstar Credit Union to request payoff information and/or payoff my/our mortgage and/or equity loan for the following property:

▶▶ Property Location

_____	_____
<i>Property Street Address</i>	<i>City</i>
_____	_____
<i>State & Zip</i>	<i>Parcel Number</i>

▶▶ Other Financial Institution Information (where the loan is held)

_____	_____
<i>Name of Institution Owed</i>	<i>Phone Number</i>
_____	_____
<i>Loan Account Number</i>	Loan Type: <input type="checkbox"/> Mortgage <input type="checkbox"/> Equity \$ <i>Payoff Amount (Qualstar to Complete)</i>

▶▶ Other Financial Institution Information (where the loan is held)

_____	_____
<i>Name of Institution Owed</i>	<i>Phone Number</i>
_____	_____
<i>Loan Account Number</i>	Loan Type: <input type="checkbox"/> Mortgage <input type="checkbox"/> Equity \$ <i>Payoff Amount (Qualstar to Complete)</i>

You are directed to immediately close the existing mortgage loan or line of credit and remove your lien on the property by reconveying within the statutory period. If applicable, attached is a payoff check from Qualstar Credit Union, negotiation of which is expressly conditioned on your guarantee of delivery of a full reconveyance of your interest in the property.

_____ Homeowner's Signature _____ Homeowner's Signature

QCU USE ONLY:

P/O _____ G/T _____ P/D _____ BY _____
 ADD _____
 APP _____ ACCT _____ DD _____ TRM _____