## **REQUEST FOR STATEMENT & AUTHORIZATION**

Date:			

Address of Other Fina	incial Institute (OFI)	Sir/Madam,
OFI Name:		I/Ma havabu authoriza van ta gravida a statoroant ta ECT fa
Address:		I/We hereby authorize you to provide a statement to FCT fo the noted mortgage/account.
 		If this mortgage is due for renewal on or around the effective date of this statement, consider this your instruction to no
Province:		renew this mortgage, pending payout of it. Should the mortgage have to be renewed, consider this your instruction
Postal Code:		to renew the mortgage only for a 6 month open term. These instructions are to have priority over any other renewa
Tel. No:		letter, document or other instrument you may have sent to me/us.
Fax. No:		The above mentioned statement should reflect the
Borrower and Proper	ty Information	outstanding principal balance; accrued interest as of the above date; any tax account debit or credit; the per diem rate
Borrower		of interest on such principal balance accruing from the above
Name (1)		date; whether the loan is in good standing; and if the
Borrower		mortgage contains a readvanceable provision and/or i
Name (2)		additional principal advances can be made after the date o
Address:		the statement. If there are multiple products secured by the mortgage security, provide a statement for each product Prepare the statement(s) on the basis that any allowable
City:		prepayment privilege has been applied prior to the calculation of any prepayment changes.
Province:		* For assignment/transfer statements, please provide the
Postal Code:		default insurer's reference number associated with this mortgage, if applicable.
Tel. No:		
		Please note: If this mortgage secures a Line of Credit o
Fax. No:		other readvanceable product, I/we hereby acknowledge
Existing Mortgage Nu	ımber (MANDATORY)	1. Upon receipt of this request freeze the credit limi
Mortgage #:		on the product so no further credit can be extended/utilized, pending receipt of payou funds.
Purpose (TO BE C	COMPLETED BY FCT)	2. Any and all credit lines are to be closed upor
	Discharge	receipt of payment and a request for discharge.
Purpose:	Assignment/Transfer	I/We hereby further acknowledge that in order to facilitate the payout and discharge/transfer of the mortgage/accoun
	Information Only	there may be additional per diem interest charged to me/u:
	,	representing the required time to deliver funds to the lending institution.
		I/we authorize you to release any information requested by FCT in connection with the Purpose, as completed by FCT I/we authorize FCT to make corrections to any typo hereunder or incomplete portions of this Request in order to obtain the statement.
		(1) Borrower's Signature

(2) Borrower's Signature