

680 Fletcher Pkwy., Ste. 100 El Cajon, CA 92020

> Phone: (619) 328-1357 Fax: (619) 328-5680

DATE.		
DATE:		
ESCROW NO.:	PROPERTY ADDRESS:	
EXISTING FIRST TRUST DEED	LOAN:	
Name of Lender:		Current Balance: \$
Address:		
Loan No.:		Phone No.:
EXISTING SECOND TRUST DE	ED LOAN, IF ANY	
Name of Lender:		Current Balance: \$
Address:		
Loan No.:		Phone No.:
HOMEOWNER'S ASSOCIATIO	N INFORMATION	
Name of Association:		
Address:		
Account No.:		Phone No.:
Dues per Month: \$		Paid to:
WATER STOCK COMPANY		
Water Stock No. Shares:		
Water Company:		
Address payment sent to:		
MAILING ADDRESS AFTER CL	LOSE OF ESCROW:	
PLEASE COMPLETE AND RET	TURN THIS FORM WITH YOUR SIG	SNED ESCROW INSTRUCTIONS.
THANK YOU.		
		described to the Fermion between

As may be specifically and properly required to complete my transaction described in the Escrow Instructions, you are hereby instructed to obtain and comply with pay-off "demands" from the Lenders or parties named above and to make payment(s) in full from funds accruing to my account at close of escrow including but not limited to, forwarding/service/transfer fees/payments/reconveyance fees, interest or prepayment charges as demanded by such instructions without my further approval. The above referenced Lender, Homeowner's Association, and Mutual Water Company may accept a copy of this signed notice as authorization to release information requested by FOOTHILLS ESCROW, LTD..

Seller:	Seller:
Signature	Signature