



FIRST EXCEL TITLE, LLC

Real Estate Settlement Services

Fairfax Office

3201 Jermantown Road, Suite 350
Fairfax, VA 22030
MAIN: (703) 259-0840
FAX: (703) 259-0841

District of Columbia Office

5335 Wisconsin Avenue, Suite 440
Washington, D.C. 20015
MAIN: (202) 686-2876
EFAX: (703) 592-9040

www.firstexcel.net

REFINANCE INFORMATION SHEET

****PLEASE RETURN THIS FORM AT YOUR EARLIEST POSSIBLE CONVENIENCE TO:**
TITLE@FIRSTEXCEL.NET**

Legal Names and Social Security Numbers of Borrowers:

NAME: _____ SSN: _____ E-Mail: _____

HOME #: _____ WORK #: _____ CELL #: _____

NAME: _____ SSN: _____ E-Mail: _____

HOME #: _____ WORK #: _____ CELL #: _____

ALL /BORROWER(S) will be present at settlement YES NO

A POWER OF ATTORNEY WILL BE NECESSARY YES NO

If yes, will we prepare the POA? _____ For Whom? _____

Who is the Attorney- In-Fact? _____

(**THIS OFFICE MUST REVIEW AND APPROVE POWER OF ATTORNEY PRIOR TO SETTLEMENT**)

NEW LENDER AND LOAN OFFICER NAME AND CONTACT INFORMATION:

LOAN OFFICER NAME: _____

COMPANY: _____

PHONE No.: _____

EMAIL: _____

Existing Lender(s) To Be Paid In Full:

(*PLEASE FEEL FREE TO SEND COPIES OF CURRENT MORTGAGE STATEMENTS)

1) Bank Name and Address: _____

Phone No.: _____

Loan No.: _____

2) Bank Name and Address: _____

Phone No.: _____

Loan No.: _____

ANY OTHER INFORMATION WE SHOULD KNOW:



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AUTHORIZATION TO RELEASE PAYOFF INFORMATION

To: _____ (Payoff Lender Name)

Re: Account Number/Loan Number: _____

Property Address: _____

Good Thru: _____ (First Excel Will complete)

Let this letter serve as my/our instruction and authorization for you to provide First Excel Title, LLC with the figures and information necessary to payoff the above-referenced loan in full, including daily interest. The Original Note, marked PAID, and/or Certificate of Satisfaction, should be forwarded to First Excel Title, LLC immediately following payment in full of this loan.

If the above-referenced account is a home equity line or other form of credit line, PLEASE DO NOT EXTEND ANY FURTHER ADVANCES OR HONOR AND OTHER DRAWS ON THE ABOVE ACCOUNT.

SIGNATURE OF BORROWER(S):

Print Name: _____

Print Name: _____

SSN: _____

SSN: _____

**Please return this completed form to:
TITLE@FIRSTEXCEL.NET**