### **Request for Payoff**

Form



#### Quest Trust Company 17171 Park Row, Suite 100 Houston, TX 77084 P: 855.386.4727 | F: 281.646.9701 Documents@QuestTrust.com

Use this form to provide applicable third parties (borrower or title company) with information about an upcoming payoff, such as the borrower information, payoff date, and the amount expected to be received. Please note this form cannot be completed by Quest Trust Company.

Α	Account Holder Infor	mation				
First & Last Name:			Account Number:	Account is an Inherited IRA:		
					Yes	No
Account Type: Traditional IRA Roth IRA SEP IR		A Simple IRA	HSA	ESA		
В	Asset Information					
Borrower Name:				Loan Amount:		
Note Collateral:				If yes, Collateral Description:		

If you are expecting a payoff on a secured note, please send a release of lien signed "read and approved" to 17171 Park Row, Suite 100, Houston TX 77084. QTC will execute on behalf of the account.

C	Payoff Information		
Is there a prepayment penalty?		If yes, penalty description:	
Payoff Amount:		Payoff Valid Through (Date):	
Per	Diem Rate:	Interest to Date of Closing:	
Penalties or Late Charges Due:		Payoff Prepared by:	

### **D** Authorization

I understand that in processing this Request for Payoff, Quest Trust Company (QTC), as my Custodian, is only acting as my agent, and nothing will be construed as conferring fiduciary status on the Custodian. I agree to indemnify and hold harmless the Custodian from any and all claims, damages, liability, actions, costs, expenses (including reasonable attorneys' fees) and any loss to my account as a result of any action taken in connection with this Request for Payoff or resulting from serving as the Custodian for this investment, including, without limitation, claims, damages, liability, actions and losses asserted by me.

I understand that all communication regarding this Request for Payoff must be in writing and must be signed by me or by my authorized agent on my behalf, and that no oral modification of my instructions will be valid.

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I understand that no person at the office of the Custodian has the authority to modify any of the foregoing provisions. I certify that I have examined this Request for Payoff and any accompanying documents or information, and to the best of my knowledge and belief, it is all true, correct, and complete.

Prepared By:

Account Holder Limited Power of Attorney

Signature

Date