

# REQUEST FOR STATEMENT & AUTHORIZATION

Date: \_\_\_\_\_

## Address of Other Financial Institute (OFI)

OFI Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_  
Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Tel. No: \_\_\_\_\_  
Fax. No: \_\_\_\_\_

## Borrower and Property Information

Borrower Name (1) \_\_\_\_\_  
Borrower Name (2) \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_  
Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Tel. No: \_\_\_\_\_  
Fax. No: \_\_\_\_\_

## Existing Mortgage Number (MANDATORY)

Mortgage #: \_\_\_\_\_

### Purpose (TO BE COMPLETED BY FCT)

	Discharge
Purpose:	Assignment/Transfer
	Information Only

Sir/Madam,

I/We hereby authorize you to provide a statement to FCT for 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 not renew this mortgage, pending payout of it. Should the mortgage have to be renewed, consider this your instruction to renew the mortgage only for a 6 month open term. These instructions are to have priority over any other renewal letter, document or other instrument you may have sent to me/us.

The above mentioned statement should reflect the outstanding principal balance; accrued interest as of the above date; any tax account debit or credit; the per diem rate of interest on such principal balance accruing from the above date; whether the loan is in good standing; and if the mortgage contains a readvanceable provision and/or if additional principal advances can be made after the date of 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 prepayment privilege has been applied prior to the calculation of any prepayment changes.

*\* For assignment/transfer statements, please provide the default insurer's reference number associated with this mortgage, if applicable.*

**Please note: If this mortgage secures a Line of Credit or other readvanceable product, I/we hereby acknowledge that:**

- 1. Upon receipt of this request freeze the credit limit on the product so no further credit can be extended/utilized, pending receipt of payout funds.**
- 2. Any and all credit lines are to be closed upon receipt of payment and a request for discharge.**

I/We hereby further acknowledge that in order to facilitate the payout and discharge/transfer of the mortgage/account there may be additional per diem interest charged to me/us 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 typos hereunder or incomplete portions of this Request in order to obtain the statement.

\_\_\_\_\_  
(1) Borrower's Signature

\_\_\_\_\_  
(2) Borrower's Signature