REQUEST FOR STATEMENT & AUTHORIZATION

Date:			

Other Financial Institution (OFI) details NOTE: a separate form to be completed for each OFI	Sir/Madam,		
NOTE. a separate form to be completed for each off	I/We hereby authorize you to provide a statement to FCT for the noted mortgage/account.		
OFI Name:			
Tel. #:	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 the shortest term available that is open to prepayment unless the mortgage contract/renewal agreement provides		
Fax #(Mandatory):			
Transit #:			
Existing Mortgage Number (Mandatory)	otherwise.		
NOTE: if the mortgage secures multiple accounts include all account numbers	The above-mentioned statement should reflect the outstanding principal balance; accrued interest as of the effective date and any		
Mortgage #:	tax account balance as well as the per diem rate of interest. If there are multiple products secured by the mortgage, include all balances in the statement or provide a statement for each		
Existing Mortgage Maturity Date (if known)	product. Prepare the statement(s) on the basis that any allowable prepayment privilege has been applied prior to the calculation of		
Maturity Date:	any prepayment charges if prepayment privileges apply to full repayments under the mortgage contract.		
Borrower and Subject Property Information	* For assignment/transfer statements, please provide the default insurer's reference number associated with this mortgage, if applicable.		
Borrower 1			
Name:	Please note: If this mortgage secures a Line of Credit or other re- advanceable product, I/we hereby acknowledge that:		
Email: Tel. #	 Upon receipt of this request you will freeze the credit limit on the product so no further credit can be extended/utilized, pending receipt of payout funds, if 		
Borrower 2	applicable.		
Name:	Any and all credit lines will be closed upon receipt of this request and of payment in full of the mortgage.		
Email:	I/We hereby further acknowledge that in order to facilitate the		
Tel #:	payout and discharge/transfer of the mortgage there may be additional per diem interest charged to me/us representing the		
Property Address	required time to deliver funds to the lending institution.		
Street:	I/we authorize you to release any information requested by FCT in		
City:	connection with the Purpose. I/we authorize FCT to make corrections to the Purpose, to any typos hereunder, and/or to complete the Purpose portion or any other incomplete portion in		
Province:			
Postal Code:	order to obtain the Statement.		
Purpose	(1) Borrower's Signature		
☐ Discharge			
Purpose: Assignment/Transfer	(2) Borrower's Signature		
☐ Information Only			
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