

Payout statement authorization (FOR DISCHARGE PURPOSES)

To:		Date :
	ohone : () -	Fax: () -
RE:		
Refe	rence number :	
Address:		
City	:	Postal Code :
We her	eby authorize and instruct you as follows:	:
a)	Please provide to the recipient me STATEMENT as of	ntioned below with a MORTGAGE DISCHARGE (Payout Date); and
b)	Do not renew the Mortgage, as the Mortgage will be paid out under new financing. However should you have to renew the mortgage, consider this your instructions to renew the Mortgage only for a six (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.	
c)	The above-mentioned statement should reflect the outstanding principal balance as at payout date, accrued interest as at the payout date, any debit or credit tax account balance (for mortgages), the per diem rate of interest on such principal balance accruing from the payout date, administration fees (if applicable), the date and the amount of the last payment, the payment frequency and whether the loan is in good standing.	
d)	If this mortgage secures a combination mortgage (securing a Conventional Mortgage, Collateral Mortgage, Credit Card, Overdraft, etc.), please provide all necessary statements.	
e)	If this mortgage secures a Line of Credit we will require that no further withdrawals may be made on the account from the date your statement is provided and that the Line of Credit be closed upon receipt of payment.	
We will	rely on the accuracy of your statement de	espite any general exception or qualification in it.
Please	fax the discharge statement as soon as	s possible to:
	Canada	
	estmount Square, Tower 1, Suite 446	
	tmount, Quebec, H3Z 2P9 phone: 1-866-465-5811	
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