

**REFINANCE INFORMATION FAX TO 508-339-1170**

NAME(S): \_\_\_\_\_  
\_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE NO(S): \_\_\_\_\_

I/We intend to be represented by an attorney. His/Her name and phone number are as follows:

Name: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Name of Lender, Address, **Phone Number**, and Account No. of any outstanding mortgage(s):  
**PLEASE INCLUDE HOME EQUITY LINES OF CREDIT AND SECOND MORTGAGES EVEN IF 0 BALANCE OWED**

1) \_\_\_\_\_  
Name of Lender Account #  
\_\_\_\_\_  
Customer Service Phone #

2) \_\_\_\_\_  
Name of Lender Account #  
\_\_\_\_\_  
Customer Service Phone #

Social Security Number(s): \_\_\_\_\_  
\_\_\_\_\_

Homeowner's Insurance Agent & Phone Number: \_\_\_\_\_  
(PLEASE INCLUDE YOUR POLICY NUMBER) \_\_\_\_\_

Condominium/Management Association Contact Name & Phone Number (if applicable)

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I/We authorize Law Offices of Patricia L. Nagle, P.C. and Patricia L. Nagle, Esq., or Lauren J. Caisse, Esq., or Hayley C. Johnston, Paralegal, to obtain the above-referenced payoff(s), discharge(s), homeowner's insurance, and flood insurance, as applicable.

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