

Mortgage Payoff Affidavit

STATE OF NEW YORK)
) ss:
COUNTY OF)

TITLE NO. _____

_____ being duly sworn deposes and says:

1) That I/We am/are the owner/s of the premises known as _____

_____ this day being conveyed to _____

2) I/We am/are aware of the payoff letter/s of: _____ dated _____ showing the prior balance and the per diem, required to satisfy the existing mortgage/s and have reason to believe the same/they is/are correct in all respects.

3) I/We am/are also aware of the fact that Westcor Land Title Insurance Company (hereinafter referred to as Westcor), as escrow agent to pay, is subjecting itself to a risk of having to make good any deficiency by reason of error and the fact that the pay off letter/s may not be deemed as estoppel/s nor does Westcor desire to subject itself to possible litigation in order to establish such fact.

4) I/We am/are also aware of the fact that Westcor may not be able to locate my/our whereabouts so as to collect from me/us any possible payments required by the mortgagee/s to obtain the satisfaction/s or discharge/s.

5) To induce Westcor to accept such payoff letter/s and as escrowee, I/We agree to indemnify and hold Westcor harmless for so doing. I/We further agree to repay Westcor or pay directly to the mortgagee/s as Westcor directs such monies as Westcor deems in their sole judgment necessary to perform the purpose of this escrow.

6) To assure Westcor of my/our availability for the purpose of reimbursing Westcor under paragraph 5, I/We freely furnish it with the following information:

SOCIAL SECURITY NO.: _____

SOCIAL SECURITY NO.: _____

My/Our Employer's Company and Address is: _____

7) I/We state to Westcor that I/We am/are not moving out of State at this time and that my/our permanent address after selling my/our above premises will be: _____

8) In the event that I/We leave the State, I/We can be reached through the following: _____

(Indicate relationship-parent, children, etc.)

Sworn to before me this _____ day of _____, 20____

Notary Public