



## Home Equity Line of Credit Payoff Request Form Instructions & Mailing Information

### PAYOFF REQUEST INSTRUCTIONS:

1. **PRINT AND FILL OUT THIS FORM** - Please complete all relevant sections of the Payoff Request form.
2. **SIGN** - Please remember to sign your Payoff Request form. We cannot process your Payoff Request without your signature OR a signed borrowers authorization form with your signature.
3. **SEND YOUR COMPLETED PAYOFF REQUEST FORM TO REGIONS BANK** - You can fax your completed Payoff Request form to 601-554-2017 or mail it to:  
Regions Bank  
Attn: Payoff Department  
PO Box 18001  
Hattiesburg, MS 39404-8001
4. **QUESTIONS?** - Call 1-800-986-2462.
5. **HOW TO SUBMIT A PAYOFF CHECK?** - You may make the payoff at a local branch or by going through the Teller line. Please note that the payoff letter should accompany the payoff check.

### MAILING INFORMATION:

#### MAILING PAYOFF CHECK:

Regions Bank  
Attn: Cashiering Department  
7130 Goodlett Farms Parkway, A4W  
Cordova, TN 38016  
\*Please include the payoff statement.

#### FORWARDING PAYMENT OVERNIGHT:

Regions Bank  
Attn: Cashiering Department  
7130 Goodlett Farms Parkway, A4W  
Cordova, TN 38016

#### WIRING INSTRUCTIONS:

Regions Bank  
ABA No. 062005690  
Account No. 4905758  
Attn: Payoff Department  
Purpose of wire: Equity Line Payoff or Pay down  
\*Please also provide customer's name and account number

**If you requested a quote more than 7 days before the expected payoff date, then please request an updated quote on the day you plan to pay the account off.**

The payoff quote will be subject to any transactions that have not posted at the time the quote is given, any preauthorized transactions, and any check or other payment made on the account that is returned unpaid or is rejected or reclaimed for any reason. Regions reserves the right to adjust the payoff amount accordingly.



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Check one of the following options to indicate if the account is to be closed and satisfied upon receipt of the payoff amount. Available funds and future advances will not be allowed. Regions will place a hold on the account blocking the payment of checks, cash advances or credit card transactions associated with the account\*.

- Refinance/Close and Satisfy First Mortgage
- Selling Home/Close and Satisfy
- Paying Balance to Zero/Close and Satisfy

If you want a verbal quote to bring the line of credit to zero, but still keep the account open, please call 1-800-986-2462.

\*The payoff quote will be subject to any transactions that have not posted at the time the quote is given, any preauthorized transactions, and any check or other payment made on the account that is returned unpaid or is rejected or reclaimed for any reason. Regions reserves the right to adjust the payoff amount accordingly.

**ACCOUNT INFORMATION**

ACCOUNT NUMBER: \_\_\_\_\_  
 CUSTOMER NAME: \_\_\_\_\_  
 SOCIAL SECURITY NUMBER: \_\_\_\_\_ -- \_\_\_\_\_ -- \_\_\_\_\_  
 COLLATERAL ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE NUMBER (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**REQUESTED "GOOD THRU" DATE (Maximum 10 days)** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**REQUESTOR/CLOSING AGENT/TITLE COMPANY INFORMATION:**

REQUESTOR/AGENT NAME: \_\_\_\_\_  
 STREET ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE NUMBER (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 NEW LENDER NAME: \_\_\_\_\_ PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
**PROPOSED CLOSING DATE (Mandatory TX only)** \_\_\_\_\_

Payoff request will not be processed without the customer's signature or an attached borrower's authorization form signed by the customer.

Check One:  Fax  Mail Fax Completed Request to: 601-554-2017

Customer Signature: \_\_\_\_\_  
PLEASE PRINT PLEASE SIGN

If agent signs for customer here, a borrower's authorization **must** be attached.