

Request for Payoff of Chapter 13 Plan

Current Date

Original Request (Please allow 15-30 days for a response)

Update (Please allow 10 days if original request was issued in the last 60 days)

This payoff letter should be sent via: **(Choose One)**

Case Information:

Chapter 13 Case Number

SSN (No dashes)

Debtor Name

Address

City

State

Zip Code

Email

Phone Number

What is the source of the funds you are going to use to payoff the plan?

Requester Information:

Choose One:

Name

Company/Firm

Address

Suite

City

State

Zip Code

Email

Phone Number

Fax Number

Purpose of the request is to satisfy the terms of the confirmed plan by means of:

Choose One:

*****REQUIRES THE DEBTOR TO OBTAIN THE COURT'S AUTHORIZATION. CONTACT THE DEBTOR'S CHAPTER 13 ATTORNEY**

ALL PAYOFFS FOR A SALE OR REFINANCE WILL EXCLUDE MORTGAGE ARREARS AND CURRENT MORTGAGE PAYMENTS IN THE PAYOFF FIGURE.

Feel Free to contact our office with any question 630-981-3888

A-G: Casey Jones x 6288 (jones_c@lisle13.com) ~ H-O: Ryan Faye x 6291 (faye_r@lisle13.com) ~ P-Z: Vickie Bequeaith x 6289 (bequeaith_v@lisle13.com)

Office of Glenn Stearns, Chapter 13 Trustee
801 Warrenville Rd, Ste 650; Lisle IL 60532
630-981-3888 ~Fax: 630-981-3896
www.lisle13.com