

<u>Request for Information from Seller</u>
Please complete the following information and return to our office with a copy of your ID as soon as possible. It may be faxed to 301.560.5393 or emailed to: info@pinnaclesettlements.com

NAME: Yiming Qiu					
0 -		Social Security#	210 47 2415		
Phone Numbers: WK			HM_(301)972-3732	_	
I holic indilibers. Wix	·	CCII	111v1_(301)972-3732		
NAME: Weifen Mac					
		Social Security#:			
Phone Numbers: WK	·	Cell_(301)580-8998	_HM		
FORWARDING AI	DRESS AFTER SETT	TLEMENT:			
212 Currier Dr, Rock	ville, MD 20850				
Will all callons be at	ton din a gottlem and 2 X	7 If not along conto			
			t our office to make arrangement t our office for further instruct		
			ct our office for further instru	CHOIIS.	
		ptcy proceedings?N	<u>) </u>	sfo ot alogi	
now would you like to	receive proceeds from S	ale: Clieckwire_ <u>x</u>	_(provide voided check/acct in	no at ciosi	
Mortgage Informati	on:				
<u>First Mortgage</u>		Second Mort			
Name of Lender:	_M&T Bank	Name of Lend	Name of Lender:		
Account Number:	<u>0014417356</u>	Account Num	ber:		
Phone:	(800)724-2224	Phone:			
Additional liens or pa	yoffs: <u>The mortgage ha</u>	as been paid off			
Homeowners/Condo	Association Dues: Yes	[X] No[]			
Company/Contact:					
Account Number:	_CW19269	ent Service			
Phone:	(301)495-0146				
Fax/Email:		11 0 4 4 6	N		
IS THERE A 2" HU	OA or Condo (if yes pro	ovide Contact info)	<u>No</u>		
Ground Rent/Leases	Yes []No [X]	Yr./Mo. Fron	t Foot / Water – Sewer facili	ity Charg	
		Yes []	No [x]		
Company/Contact:		Company/Con	tact:		
Address:		Address:			
Phone:		Phone:			
Fax/Email:		Fax/Email:			
We hereby give our c	onsent for the release of	any and all payoff figures	regarding liens against the re	ferenced	
property.					
		Weit	n Mao 07/		
	07/2	0/21		20/21	
Signature	Date		Dat		