

REQUEST FOR CANCELLATION

In accordance with the provisions of LA C.C. Article 3366, The Recorder of Mortgages for Livingston Parish, Louisiana is hereby requested and directed to cancel the recordation of the following described privilege :

- () **MORTGAGE** granted by _____
in favor of _____
in the sum of _____ Dated _____
MOB _____ Page _____ Entry No _____
- () **JUDGMENT** in favor of _____
Against _____
in the sum of _____ MOB _____ Page _____ Entry _____
- () **OTHER** _____
In favor of _____ Against _____
in the sum of _____ MOB _____ Page _____ Entry No _____

THIS REQUEST TO CANCEL IS BASED ON THE FOLLOWING
Please check the appropriate item

- () RS 9:5167.1 Affidavit to Cancel by Title Insurance Office
- () RS 9:5167A (1) Notary Affidavit Proving Payment of Lost Paraphed Note
- () RS 9:5168 Affidavit of Obligee of Record of Lost Paraphed Obligation
- () RS 9:5169 Release of Unparaphed Obligation (**formerly LA RS 44:106**)
- () RS 9:5170A (1) Note-Original Promissory Note Attached (formerly 44:107A(1))
- () RS 9:5171 Certificate by Sheriff, Marshall in Judicial Sale or Court Order
(formerly LA RS 44:108)
- () RS 9:5172 Release by Licensed Financial Institution
(formerly LA RS 44:109)
- () RS 9:5175C Order of Discharge in Bankruptcy (**formerly LA RS 44:111C**)
- () RS 13:4344.1 Affidavit of Title Insurer Directing Partial Cancellation of
Mortgage Certificate
- () CC Art 3367 Effect of Mortgage or Privilege has ceased for lack of reinscription
Mortgage Certificate from Clerk is Required
- () CC Art 3368 No suit or motion to revive judicial mortgage
*** (Civil Certificate from the Court that rendered Judgment is
required)***
- () Partial Release _____
- () Other _____

The undersigned acknowledges that he is liable and shall indemnify the Recorder of Mortgage of Livingston Parish and any of its employees or agents relying on this Request for Cancellation for any damages they may suffer as a consequence of such reliance in accordance with provisions of Louisiana Law.

This Request submitted on _____, 20 _____

SIGNATURE _____
PRINTED NAME _____
COMPANY NAME _____
TITLE _____
ADDRESS _____
TELEPHONE _____