

**REQUEST FOR CANCELLATION BY LICENSED FINANCIAL INSTITUTION
(Pursuant to R.S. 9:5172)**

**STATE OF LOUISIANA
PARISH OF LIVINGSTON**

BE IT KNOWN that on this _____ day of _____, 20____, before me the undersigned Notary, duly commissioned and qualified in and for the above named Parish and State,

PERSONALLY CAME AND APPEARED:

Represented herein by:

Title: _____, its duly authorized representative, who after being duly sworn declared:

The above named Financial Institution is: *(Please check the appropriate box)*

Bank Credit Union Lending Agency Other Person Conducting Such Business

Whose licensing or regulatory authority is

(Please check the appropriate box)

The above named financial institution was the obligee or authorized agent of the obligee of the secured obligation described below when the obligation was extinguished;

The above named financial institution is the obligee or authorized agent of the obligee of the secured obligation described below;

The said secured obligation has been paid or otherwise satisfied or extinguished and further the said mortgage or privilege is hereby released.

The Recorder of Mortgages in and for the Parish of Livingston is hereby requested, authorized and directed to cancel the recordation of the mortgage or privilege described as follows:

Mortgage or Privilege granted by

In favor of

In the sum of _____ Dated _____

Registry (Instrument) Number _____

of the official records of Livingston Parish, Louisiana, which affects the following described property:

The undersigned acknowledges that he/she is liable to and shall indemnify the Recorder of Mortgages 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 R.S. 44:110.

WITNESSES:

SIGNATURE: _____

PRINTED NAME:

COMPANY NAME:

TITLE:

ADDRESS:

TELEPHONE NO:

Sworn to and subscribed before me this _____ day of _____, 20____.

Notary Public

Printed Name: _____

ID or Bar Roll Number: _____

Commission Expires: _____