

TITLE ORDER NO.

ESCROW NO.

APN NO.

**REQUEST FOR FULL RECONVEYANCE**

A Full Reconveyance will be issued only when the original note or notes, together with the Deed of Trust securing payment thereof, are surrendered to the Trustee for cancellation, accompanied by this request signed by all owners of the note or notes, together with the applicable reconveyance fee(s).

Date \_\_\_\_\_

To: \_\_\_\_\_, Trustee

The undersigned Beneficiary is the legal owner and holder of the note or notes for the original sum of \$ \_\_\_\_\_ and all other indebtedness secured by Deed of Trust dated \_\_\_\_\_ executed by \_\_\_\_\_, Trustor, to \_\_\_\_\_, Trustee, and recorded \_\_\_\_\_ as Instrument No. \_\_\_\_\_, Official Records of \_\_\_\_\_ County, State of California.

All that certain real property described as:

**See Exhibit "A" is attached hereto and made a part hereof**

You are hereby notified that said note or notes together with all other indebtedness secured by said Deed of Trust have been fully paid and satisfied; and, upon payment to you of any sums owing to you under the terms of said Deed of Trust, you are hereby requested and directed to cancel and surrender said note or notes and reconvey, without warranty to the "person or persons legally entitled thereto," the estate now held by you and acquired through said Deed of Trust.

Mail recorded reconveyance to:

\_\_\_\_\_

\_\_\_\_\_

By: \_\_\_\_\_

By: \_\_\_\_\_