|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Dist |  | Co |  | Rte |  | KP(P.M.) |
|  | | | | | | |
| Parcel | | |  | Exp Auth | | |
|  | | | | | | |
| Date | | | | | | |

Gentlemen:

Re: Your Borrower: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Loan No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Department of Transportation requests your assistance on behalf of your borrower referenced above. Borrower’s property, which is being acquired for transportation purposes, is presently encumbered by a deed of trust in which you are the beneficiary.

This property owner may be entitled to an additional payment from the State to compensate for higher interest costs which may be incurred in purchasing replacement property. To qualify for this payment, we must obtain data pertaining to this loan at its termination date.

When the account is closed, please complete and sign the certification shown below on the enclosed duplicate copy of this letter and return it to me in the self-addressed envelope provided. Your assistance is greatly appreciated.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Right of Way Agent

Date Loan Terminated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby certify that at the above termination date the remaining principal balance of the above-referenced loan was $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ with an interest rate of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%, that the remaining term to amortize this loan was \_\_\_\_\_\_\_\_\_\_\_\_ months at a monthly principal and interest payment of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and that there were no changes in the terms of this loan for the 180 days preceding \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (State’s first offer to purchase).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Loan Officer