REQUEST FOR PARTIAL CANCELLATION OF MORTGAGE OR PRIVILEGE AND PARTIAL RELEASE BY LICENSED FINANCIAL INSTITUTION PURSUANT TO R.S. 9:5172

State of _____

Parish or County of _____

BE IT KNOWN THAT on this _____ day of _____ 20___, _____ (name of financial institution), herein represented by its undersigned duly authorized officer or officers, declares the following:

The institution is a licensed financial institution as defined in R.S. 9:5172 et seq., and is the obligee or authorized agent of the obligee for the obligation secured by the mortgage or privilege described as follows:

A mortgage or privilege granted by:_____

In favor of: _____

Date of Instrument: _____

Parish of Recordation: _____

Recording Data: _____

The institution grants a partial release of the above-described mortgage or privilege, and does hereby release ONLY the following described property from the above-described mortgage or privilege, to wit:

Legal description of released property is as follows or is hereby attached as Exhibit “A”:

The institution hereby requests, authorizes, and directs the Clerk of Court and Ex-Officio Recorder of Mortgages for the Parish in which the above-described property is situated to release the above-described property from the mortgage or privilege described above and to partially cancel the above-described mortgage or privilege ONLY AS TO such described property hereby released from the same.

The institution further expressly declares that the above-described mortgage or privilege is not released or cancelled as to any other property described in such mortgage or privilege, and such mortgage or privilege shall continue to encumber and remain in full force and effect as to all other property described therein.

The recorder of mortgages shall not be liable for any damages resulting to any person or entity as a consequence of partially cancelling a mortgage or vendor's privilege pursuant to this form.

[Choose one of the two following signature options.]

THUS DONE AND SIGNED, before me, Notary Public, on the date set forth above.

Name of officer and title
Name of financial institution
Requested mailing address
City, state, and zip code

_____

Notary Public

(Printed name of notary and bar roll or notary number)

OR

THUS DONE AND SIGNED, by the two undersigned authorized officers of the above named financial institution on the date set forth above.

Name of officer and title
Name of financial institution
Requested mailing address
City, state, and zip code

Name of officer and title
Name of financial institution
Requested mailing address
City, state, and zip code