|  |  |
| --- | --- |
|  | **Iconic Title Agency LLC​​**1815 Lakewood Road, Suite 127​​Toms River, NJ 08755​​Phone: (732) 592-4400​​Fax: (732) 592-4149​​ |
| TO: | Iconic Title Agency LLC​​ |  | Date: |  |
|  | 1815 Lakewood Road, Suite 127​​Toms River, NJ 08755​​ |  | Order No.: |  |
|  |  | Property: |  |

**PROCEEDS INSTRUCTIONS**

The Undersigned hereby authorize(s) and instruct(s) Iconic Title Agency LLC​​ to disburse proceeds/refunds as follows:

|  |  |  |  |
| --- | --- | --- | --- |
|  ​​ |  | CALL when check is ready for pick up at the following number: |  ​​ |
|  |  |  |  |
|  ​​ |  | WIRE funds to: |  |
|  |  | Bank Name: |  ​​ |
|  |  | Address: |  ​​ |
|  |  | Routing No.: |  ​​ |
|  |  | Account No.: |  ​​ |
|  |  | Account Name: |  ​​ |
|  |  |  |  |  |
|  ​​ |  | MAIL check to: |  ​​ |
|  |  |  |  ​​ |
|  |  |  |  ​​ |
|  |  |  |  |  |  |  |
|  ​​ |  | TRANSFER |  ​​ |  | All Net Proceeds/Refunds, or |  ​​ |  | **$​​** |
|  |  |  |  |  |
|  |  | To:  |   ​​ |
|  |  |  |  |
|  |  | Attn: |   ​​ |
|  |  |  |  |
|  |  | Order No.: |   ​​ |
|  |  |  |  |

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_​​

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