|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | **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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