



ESTOPPEL REQUEST FORM

Date of Request: _____

Property Information

Property Address: _____

Owner's Name: _____

If Bank Owned,
Date of Certificate of Title: _____

Expected Closing date: _____

Buyer(s): _____

CONTACT INFORMATION

Person Requesting Estoppel: _____

Name of Company: _____

Company Address: _____

Phone Number: _____

Fax Number: _____

Email Address: _____

Comments: _____

Pursuant to Florida Statute 720.30851, Ardent Property Group, LLC has at least **ten (10) business days** from the Date of Receipt of an Estoppel Request to provide the requested information. If you are requesting an Expedited Payoff (for an add'l fee of \$119) three (3) business days processing, please advise of same in the Comment Section provided and state the nature and reason that the payoff information is needed on an expedited basis and we will attempt to fulfill your request.

NOTES:

- If property is at Attorney for collections, Estoppel will be forwarded to them for completion.
- A copy of the Warranty Deed is required to process.
- If a specific Form is required, please forward it with this completed request and payment.
- Estoppel will not be released until payment is received.

Estoppel Fee: \$299.00 made payable to Ardent Property Group, LLC
Please note, if an account is delinquent there is an additional \$179.00 fee