



Partners Capital Finance, LLC

# AUTHORIZATION FOR PAYOFF

DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_

LENDER NAME \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

OVERNIGHT ADDRESS  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ACCOUNT HOLDER \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_

VEHICLE ID NUMBER \_\_\_\_\_

VEHICLE MAKE/MODEL \_\_\_\_\_

The undersigned hereby authorizes and directs you to accept payment and documentation from:

**PARTNERS CAPITAL FINANCE, LLC  
2640 JACKSON BOULEVARD, SUITE 7  
RAPID CITY, SD 57702**

The payoff due to the institution on my account in the amount of \$\_\_\_\_\_ good thru \_\_\_\_\_ and to surrender to them, or order, the properly endorsed Certificate of Title/Ownership to the above referenced vehicle. I UNDERSTAND THAT THIS PAYOFF WILL BE SENT WITHIN THE NEXT THIRTY (30) DAYS FROM THE DATE OF SALE, AND I MUST CONTINUE TO MAKE PAYMENTS UNTIL THE ACCOUNT HAS BEEN SATISFIED IN FULL.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_