

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Phone Number]  
[Email Address]

[Date]

[Lending Institution Name]  
[Lien Release Department]  
[Address]  
[City, State, Zip Code]

**RE: Authorization to Close Account and Release Lien**

Account Number: [Your HELOC Account Number]  
Property Address: [Full Address of the Property]

To Whom It May Concern,

I am writing to formally request the closure of my Home Equity Line of Credit (HELOC) associated with the account number listed above. As of [Date], the balance on this account is zero, or has been paid in full via [Wire Transfer/Check/Escrow].

I hereby authorize [Lending Institution Name] to:

- Permanently close the credit line and terminate my ability to draw additional funds.
- Release the lien held against the property located at [Property Address].
- Execute and record a formal Satisfaction of Mortgage or Lien Release document with the appropriate County Recorder's office.

Please send the recorded release or confirmation of the filing to my mailing address listed above once the process is complete.

If there are any remaining fees required to process this release, please contact me immediately at [Phone Number].

Sincerely,

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[Your Signature]

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[Co-Borrower Signature, if applicable]

[Your Printed Name]

[Co-Borrower Printed Name]