

REQUEST TO CANCEL

In accordance with the provisions of La. C. C. Article 3366, the Recorder of Mortgages for St. Tammany Parish Louisiana is hereby requested and directed to cancel the recordation of the following described mortgage or privilege:

Mortgage granted by _____

In favor of				
		, Dated		
Recorded in MOB	, Folio	_, Instrument Number		
Judgment in favor of				
		, Dated		
		, Instrument Number		
		, Dated		
Recorded in MOB	, FOIIO	, Instrument Number		
This Request to Cancel is based	d on the following: (Please chec	ck the appropriate box and attach documentation)		
Affidavit to Cancel by	Title Insurance Officer (LA. R.S.	. 9:5167.1)		
Release by Licensed F	inancial Institution (LA R.S. 9:51	172, formerly LA. RS. 44:109)		
Notary Affidavit Prov	ing Payment of Lost Paraphed N	<u>lote</u> (LA. R.S. 9:5167 A.(1))		
Release by Notarial A	act with Paraph (LA. R.S. 9:5170	A(2) , formerly LA. R.S. 44:107 A(2))		
Note - Original Promi	ssory Note Attached -"Paid" or	"Cancelled"(LA R.S. 9:5170A(1), formerly LA.R.S. 44:107A(1))		
Affidavit of Obligee o	f Record of Lost Paraphed Oblig	ation (LA. R.S. 9:5168)		
	Bankruptcy (LA. R.S. 9:5175C, f			
_		n on Mortgage Certificate (LA. R.S. 13:4344.1)		
	Cancellation Affidavit (LA. R.S.	· · · · · · · · · · · · · · · · · · ·		
	ed Obligation (LA. R.S. 9:5169, f			
		rt Order (LA. R.S. 9:5171 , formerly LA. R.S. 44:108)		
•	-			
	privilege has ceased for lack of	·		
	Certificate required to be attach			
		d judicial mortgage (CC Art. 3368)		
(Clerk's Civi	il Certificate required to be attac	ched)		
Other:				
· ·		demnify the Recorder of Mortgages and any person relying on as a consequence of such reliance in accordance with the		
Attached is my payme	ent in the amount of \$	of fees to effect the above requested cancellation.		
• ,	count Number	·		
Payment will be made	e through e-Recording Vendor.			
Date:				
Signature:				
Company Name:		Title:		
Mailing Address:				
City:	Sta	ate:ZIP:		
Telephone #:	Em	nail:		



AFFIDAVIT DEPOSITING CASH BOND TO CANCEL LIEN

of lawful a	age and a resident o	f and domicile	ed in				
			or				
attorney f	or					who	
being duly	sworn and depose	d and said tha	t:				
There is re	ecorded in the Mort	gage Records	of St. Tamma	any Parish, Louis	iana a lien, or		
statement	of claim or privileg	e dated		, filed for record	on		
in favor of	<u> </u>						
	st						
in the sum	n of		Dollars \$				
recorded	at MOB	, Folio	, Insti	ument Number			
bearing ag	gainst the following	described pro	perty:				
described	is an interested par property within the the following:	-	-		•		
described herewith	property within the	meaning of L	ouisiana R.S.	9:4835 and purs	suant thereto	deposits	
described herewith 1) Ca	property within the	meaning of L	ouisiana R.S.	9:4835 and pursD	ollars \$	deposits	
described herewith to 1) Ca 2) Ce	property within the the following: sh sum of	e meaning of L	ouisiana R.S.	9:4835 and pursD	ollars \$	deposits,	
described herewith to 1) Ca 2) Ce Dr	property within the the following: sh sum of rtified check/Cashie	e meaning of L	ouisiana R.S.	9:4835 and pursD	ollars \$	deposits,	
described herewith to 1) Ca 2) Ce Drain	property within the the following: sh sum of rtified check/Cashidawn on	e meaning of L	ouisiana R.S.	9:4835 and pursD Bank, datedDo	ollars \$	deposits	
described herewith 1) Ca 2) Ce Dri in represent	property within the the following: sh sum of rtified check/Cashidawn on the sum of	e meaning of Ler's check nur	nber	9:4835 and pursDBank, datedD	ollars \$	deposits,	

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The furnishing of this Cash Bond is	without	t waiver of, and	with full reservation	of,			
all rights of				(Appearer)			
including all rights of				(Appearer)			
to obtain cancellation of said labor lien, cancellation of the cash bond, and return of							
bond on the ground that the lien i	s prescri	bed, preempte	d or otherwise unenf	orceable.			
Appearer further hereby agrees to	relieve,	release, hold h	armless and indemni	fy			
Melissa R. Henry, Clerk of Court fr	om any a	and all damages	s resulting from the c	ancellation of the			
encumbrance described hereinabo	ove.						
	Name	e:					
	Title:						
	La. Ba	ar Roll No. (<i>if ap</i>	pplicable):				
	Maili	ng Address:					
	City:		State:	ZIP:			
	Telep	hone:	Email:				
State of							
Parish/County of							
Sworn and subscribed before me This		day of		·			
Notary Public							
Printed Name:		<u> </u>					
Notary ID or Bar Roll Number:		_					
Commission Expires:		_					
Approved: Date			CLEDY OF COURT				
			CLERK OF COURT				

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