

Reference: Partial Release of Mortgage

Project ID: _____; Parcel No. _____

_____ County

The _____ is in the process of acquiring right of way in _____ County for the improvement of highway _____.
owns a parcel on the project that will be impacted.

County records indicate that you are the holder of a mortgage executed by the above-named property owner. The mortgage was recorded in the office of the _____ County Register of Deeds as document number _____. We are requesting a partial release of mortgage from your financial institution.

Enclosed are the following documents:

- Partial Release of Mortgage (RE1549)
- Copy of a _____ executed by _____ in the amount of \$ _____.
- Right of Way Plat
- Owner Authorization
- Self-Addressed Postage Paid Envelope

Please return the executed Partial Release of Mortgage and indicate if you wish to be named on the check along with the borrower. You may retain the other documents for your records. Should you have any questions, you may contact me at _____.

Sincerely,

Enclosures: Partial Release of Mortgage, Conveyance, Right of Way Plat, Owner Authorization, Self-Addressed Postage Paid Envelope

PARTIAL RELEASE OF MORTGAGE

Wisconsin Department of Transportation
RE1549 03/2019 Ch. 32 Wis. Stats.

The undersigned releases from the lien and operation of a mortgage executed by _____ (Borrower) to _____ (Lender) recorded in the office of the Register of Deeds of _____ County, Wisconsin _____, only the following portion of the mortgaged real estate in the above-identified county:

LEGAL DESCRIPTION IS ATTACHED AND MADE A PART OF THIS DOCUMENT BY REFERENCE.

<p style="text-align: center;">This space is reserved for recording data</p> <hr/> <p>Return to</p> <hr/> <p>Parcel Identification Number/Tax Key Number</p>

The undersigned retains a lien upon the balance of the premises not previously released that is described in said mortgage and certifies that the undersigned has the right to release said mortgage.

CORPORATE ACKNOWLEDGEMENT

INDIVIDUAL ACKNOWLEDGEMENT

_____ Corporation/Bank Name	
_____ Officer Signature	_____ Date
_____ Print Name and Title	
_____ Officer Signature	_____ Date
_____ Print Name and Title	

_____ Signature	_____ Date
_____ Print Name	
_____ Signature	_____ Date
_____ Print Name	
_____ Date	
State of _____)
_____ County) ss.
On the above date, this instrument was acknowledged before me by the named person(s).	
_____ Signature, Notary Public, State of Wisconsin	
_____ Print Name, Notary Public, State of Wisconsin	
_____ Date Commission Expires	