

Rich Lafiata
Finance Manager
Newtown Township
209 Bishop Hollow Dr
Newtown Square, PA 19073

RE: Escrow Release

Mr. Lafiata,

I am requesting a release of the escrow for the property located at _____,
in the amount of \$_____. The work has been completed and approved by a Township
Inspector. Please release the escrow to _____ and mail to the following
address: _____.

Thank you,



Township of Newtown

209 Bishop Hollow Road
Newtown Square, PA 19073
610-356-0200
www.newtowntownship.org

Authorization for
Release of Escrow

Please release the Escrow:

For the Property at _____

Escrow Account # (if known) _____

In the Amount of _____

Please make check payable to:

Name _____

Address _____

City _____ State _____ Zip Code _____

The appropriate departments have reviewed/inspected the property associated with this escrow account and have determined the escrow may be released.

Reviewed by (completed by Twp) _____

Approved by (completed by Twp) _____