

CITY OF STOCKTON  
ADMINISTRATIVE SERVICES  
REVENUE COLLECTIONS DEPARTMENT  
EMAIL: [revenuecollections@stocktonca.gov](mailto:revenuecollections@stocktonca.gov)  
FAX: 209-937-8051

**REQUEST FOR PAYOFF DEMAND**

**NOTE:** Turn around for payoff demand may take up to 10 business days.

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

\_\_\_\_\_

EMAIL: \_\_\_\_\_

My connection to said property:

☐ PROPERTY OWNER      ☐ LISTING AGENT (Copy of listing agreement attached)

☐ TITLE / ESCROW / BANK REPRESENTATIVE

AFFECTED ADDRESS: \_\_\_\_\_

REASON FOR REQUEST: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Requesting Party

\_\_\_\_\_  
Date:

Initial Payoff Request fee \$90.05

Update Payoff Request fee \$16.50

**OFFICE STAFF ONLY-**

Customer ID: \_\_\_\_\_ Location ID: \_\_\_\_\_ APN: \_\_\_\_\_

Lien #: \_\_\_\_\_ Processed by: \_\_\_\_\_ Date: \_\_\_\_\_