



**PARKWAY BANK & TRUST COMPANY
LAND TRUST AUTHORIZATION FORM**

TO: PARKWAY BANK & TRUST COMPANY, TRUST DEPT.

Email to: _____ or Fax to : 708-867-5658

jsochacki@parkwaybank.com
emihajlovic@parkwaybank.com
llynch@parkwaybank.com

RE: Trust No: _____ (see Notes shown within this form regarding emails and fees)

YOU ARE HEREBY AUTHORIZED AND DIRECTED TO:

1. Forward:

A regular copy of above noted trust

A certified copy of above noted trust

Regular mail to:

Name Address

Fax to:

Name Fax number

Email to:

Name Email address

2. You are authorized to disclose information contained in this trust via phone, regular mail, fax or email to the following party:

Name: _____

Address: _____

Phone #: _____

Fax #: _____

Email: _____

**** IMPORTANT NOTE:**

As a result of the Privacy Act all emails with account information will be sent by ENCRYPTED CONFIDENTIAL email which may require you to set up a password before you open it. If you prefer your information be sent WITHOUT encrypted email you MUST check this box:



(Signature) Date: _____

In the event we are unable to comply with your request please furnish a phone number or email address where we can notify you between 9AM and 5PM:

Phone# _____ or Email address _____

NOTE: Based on your above request, the following fees may be billed to your account
\$50.00 fee for certified copy of Trust
\$15.00 fee for fax service (N/C for email service)
\$25.00 fee for regular copy of Trust
\$75.00 min. fee for copying entire file.