

Reference: Partial Release of Mortgage Airport: ; Parcel No.

BOA project #:

AIP#:

; 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 $ .
* Exhibit A map
* 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, Exhibit A map, Owner Authorization, Self-Addressed Postage Paid Envelope

# PARTIAL RELEASE OF MORTGAGE

This space is reserved for recording data Return to

Parcel Identification Number/Tax Key Number

Wisconsin Department of Transportation Bureau of Aeronautics Ch. 32 Wis. Stats. 01/2025

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.

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 |  |  | Signature | Date |
| Officer Signature | Date |  | Print Name |  |
| Print Name and Title |  |  | Signature | Date |
| Officer Signature | Date |  | Print Name |  |
| Print Name and Title |  |  | 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