





## Are you interested in saving money?

Want to do business locally with a bank who supports your community?

#### Is your monthly budget tight?

Here at First Federal Bank SSB we can help! We are looking towards the future as it is brighter than ever and there are new paths to growth and success. Complete the following documentation to see if we can get your loan refinanced and have you in a better financial position. We are excited about the opportunity to be your banking solution!

Sincerely,

Torrey Tolbert Loan Officer

NMLS 1318607

Jason Hunter

CFO & Commercial Loan Officer

NMLS 1844649

**CCLO** 







### **Loan Refinance Information**

COLLATERAL INFORMATION										
Year:	Make:				Model:			Mileage	:	
VIN:	Insurance Provider:									
CURRENT FINANCIAL INSTITUTION										
Current Lender (existing loan): Ad		Add	ddress:			- 1	Account No.			
Current Loan Balance:			Current Payment:					Current Interest Rate:		
\$			\$			ly □ Annually			%	
REFINANCE LOAN INFORMATION										
Desired Payment Date:			Desired Payment Amount:			Desired Interest Rate:				
			\$							%
ADDITIONAL REQUIRED DOCUMENTS										
☐ Copy of Driver's License										
□ 10-Day Payoff Authorization Letter (attached page 3) (wet signature required)										
□ VTR-271 Limited Power of Attorney (attached page 4) (wet signature required)										
□ Completed Consumer Loan Application – found at - <a href="https://firstfedlfd.loanwebcenter.com/Account/Login?ReturnUrl=%2fApplyNow">https://firstfedlfd.loanwebcenter.com/Account/Login?ReturnUrl=%2fApplyNow</a> (~ 5 minutes)										







TO:	
Account Holder Name(s):	
Account Number:	
Tolbert at First Federal Bank Littlefield Security Agreement, and a copy of the p	ten Payoff for the above account number to be provided to Torrey, Texas. In addition, please send him a copy of the Collateral Pledged, promissory note. Also, please include wiring instructions. He is cessary concerning my loan accounts. His contact information is:
First Federal Bank SSB Torrey Tolbert P.O. Box 1390	
Littlefield, Texas 79339 Office (806) 385-7511	
Fax (806) 385-3066 Lending@FirstFedLFD.com	
Thank you.	
Sincerely,	
ACCOUNT HOLDER SIGNATURE	-



Vehicle Information

# **Limited Power of Attorney for Eligible Motor Vehicle Transactions**

#### Information

All sections of this form must be properly completed in order for this document to be accepted. Original signatures are required, only black or blue ink are acceptable, and no alterations are allowed on this form.

This completed and signed form grants the grantee, with full power of substitution, full power and authority to perform every act necessary and proper to purchase, transfer, and assign the legal title to the motor vehicle described on behalf of the grantor. "Full power of substitution" means that whoever is given this power of attorney may delegate that power by putting another person in his or her place by a substitute power of attorney.

This power of attorney cannot be used in a dealer transaction to complete a title assignment on a motor vehicle subject to federal odometer disclosure. In compliance with federal law, the secure *Power of Attorney for Transfer of Ownership to a Motor Vehicle* (Form VTR-271-A) must be used when use of a power of attorney is permitted by the applicable regulations for a vehicle subject to federal odometer disclosure.

If a power of attorney is used to apply for title, initial registration, or a certified copy of title, the grantor (person signing this form) and the grantee (person signing the application) must include a photocopy of their photo identification as required by state law.

Vehicle Identification Number	Year	Make	Body Style	Model				
License Plate State and Number (if any)	Title/Document I	Title/Document Number (if unknown, leave blank)						
Grantor Information								
First Name (or Entity Name)	Middle Name	Middle Name		Suffix (if any)				
Address								
City	County		State	Zip				
Grantee Information								
First Name (or Entity Name)	Middle Name		Last Name	Suffix (if any)				
Address								
City	County		State	Zip				
<b>Certification</b> – State law make	s falsifying informa	ation a third o	degree felony					
I, the grantor of the county and state as listed a	bove, owner of the motor ve	hicle described abo	ve, certify that I do make	, constitute, and appoint				
the grantee of the county and state as listed at	•	•	•	•				
name, place, and stead to title, and to allow my	, attorney the authority to su	ıbstitute as it pertai	ns to the motor vehicle d	escribed above.				
Signature of Grantor	Printed Nar	ne (Same as Signatu	ire)	Date				

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