



Request for Lien Release/ Demand

Please email: CSSD-EscrowTitleRequest@cssd.lacounty.gov
with the following information below:

1. This completed form
2. Copy of the Abstract of Support Judgment(s) -
This document is required to timely and accurately process
the lien release.

Your Company Name:

Contact Person:

Contact Person Email:

Phone Number:

Address:

Fax Number:

Escrow Number

Transaction Type:

Expected Closing date

(To avoid mistaken identity, please do not copy information from the "Abstract Support Judgment")

Borrower/Debtor Name:

Social Security Number:

Date of Birth:

Property Address:

Remarks/Comments

*Relationship to Debtor

Your preferred method of response

*Please note "Demands" alone will only be
sent via Email or Fax to confirm completion

*Release of Lien signed documents will
be sent via regular mail or FedEx only

Check all that apply.

*UPS not accepted