**DATE:** [Insert Date]

**TO:**
Escrow Records Custodian
[Escrow Company Name]
[Address]
[City, State, Zip Code]

**RE: LETTER OF REPRESENTATION AND REQUEST FOR RECORDS**

**Escrow Number:** [Insert Number]
**Property Address:** [Insert Property Address]
**Closing Date:** [Insert Date]
**Client Name:** [Insert Client/Principal Name]

To Whom It May Concern,

Please be advised that this office represents [Client Name] regarding the above-referenced escrow file. Attached to this letter, please find a signed authorization from our client permitting the release of all files and information to our firm.

Pursuant to this representation, we formally request a complete copy of the escrow file, including but not limited to:

- Signed Escrow Instructions and any amendments;
- Final Closing Statements (HUD-1 or Closing Disclosure);
- Commission Instructions;
- Preliminary Title Reports;
- Correspondence, emails, and internal file notes;
- Wiring instructions and proof of disbursements.

Please provide these records in electronic format to [Email Address] or by mail to the address listed below within [Number] business days.

If there are any costs associated with duplicating these records, please notify our office immediately before processing the request.

Thank you for your prompt cooperation in this matter.

Sincerely,

[Your Signature]
[Your Printed Name]
[Your Title/Law Firm Name]
[Phone Number]
[Email Address]