

**OWNER'S INTENT TO CURE
FILE IMMEDIATELY AT NO COST TO PROTECT YOUR RIGHTS**

Please legibly print the following information:

Foreclosure Sale Number _____

Borrower Name(s) _____

Property Address in Foreclosure _____

City, State, Zip _____

Address for Cure Figures _____
(if different from above)

City, State, Zip _____

Phone _____

Email _____

I am requesting the Public Trustee to obtain a written statement of the amount necessary to bring my loan current. I understand that I must bring in cash, certified funds, teller's check or a draft denominated as an official check that is a teller's check or a cashier's check as those terms are defined in and governed by the "Uniform Commercial Code," Title 4, CRS by 12 noon the day before the scheduled sale date in order to cure this loan. **I understand that it is my responsibility to contact the Office of the Public Trustee for updated figures for the amount to cure as interest, late fees, attorney fees, etc., continue to accrue. The signature below verifies that I filed my Intent to Cure at least fifteen (15) days prior to the scheduled sale date.**

Original signature of owner/grantor OR lienholder, required.

Date

Printed Name of owner/grantor OR lienholder, required.

A COPY OF THE WARRANTY DEED OR THE EVIDENCE GIVING YOU THE RIGHT TO CURE MUST BE ATTACHED PURSUANT TO CRS 38-38-104(1).

Please be advised that the Office of the Public Trustee does not give legal advice. For counseling and assistance with the foreclosure process, please refer to our "Homeowner/Tenant Help" brochure. You may contact us at 308 Byers Ave, PO Box 288, Hot Sulphur Springs, CO 80451. Phone Number: 970-725-3061 or submit via email: treas@co.grand.co.us

Date received by Public Trustee's Office and initials