

## INTENT TO CURE

NOTICE: You **do not need to pay any fee** to the Public Trustee or any third party to submit an Intent to Cure.

Public Trustee Foreclosure No. \_\_\_\_\_

I hereby notify you of my intent to cure the default on the referenced Public Trustee foreclosure.

I am the owner of record or represent the owner of record for the property involved.

Please notify me of the total cost to cure this foreclosure.

Sale Date is set for \_\_\_\_\_.

**\*Intent must be filed at least 15 days before the sale date.**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Current Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date Received:

