

**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 \_\_\_\_\_

Fax \_\_\_\_\_

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(s)

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 100 Jefferson County Parkway, Suite 2510/1540 Golden, CO 80419-1540. Phone Number: 303- 271-8580 Fax: 303-271-8588 or email: eforeclosures@jeffco.us