UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF NEW YORK	
In re:	Case No.
Debtor(s).	Chapter
LOSS MITIGATION REQUEST BY DEB	TOR(S) AND CERTIFICATE OF SERVICE
OF THIS REQUEST TO FILE AND SERV REQUEST AND A NOTICE OF HEARING REQUEST ON THE DEBTOR(S), DEF TRUSTEE. IF AN OBJECTION TO LOSS	
	ase and hereby request to enter into the Loss
Mitigation Program with respect to my/our Prop	•
Address:	
	;
With the following Creditor:	
Creditor's Name and Address:	With respect to the Property, Creditor is the holder of a:
	− □ First Mortgage
	□ Second Mortgage
	☐ Other (please specify):

## II. **SIGNATURE**:

I understand that if the court orders Loss Mitigation in this case, I am required to comply with the Loss Mitigation Program Procedures and will participate in good faith. I understand that Loss Mitigation is voluntary for all parties and that I am not required to enter into any agreement or settlement with any other party as part of entry into the Loss Mitigation Program. I also understand that no other party is required to enter into any agreement or settlement with me. I understand that I am not required to request dismissal of my case as part of any resolution or settlement that is offered or agreed to during Loss Mitigation. I also understand that if a Loss Mitigation Order is entered, I am responsible pursuant to section VII(B) of the Loss Mitigation Program Procedures for adjourning any matters pending between the Loss Mitigation Parties for which I am the movant. I certify that the Property in question consists only of real property used as my principal residence in which I hold an interest.

Dated:	Debtor
Dated:	Joint Debtor
DEBTOR(S):	NTACT INFORMATION FOR ATTORNEY FOR
Name:	
Title:	
Firm:	
Address:	
Address 2:	
City:	State: Zip Code:
Phone No.:	Facsimile No.:
Email Address:	

## IV. CERTIFICATE OF SERVICE:

	I,		, state under penalty of perjury that the
follow	ing is true and accurate.		
	(1) That I am not a par	=	ver 18 years of age, and reside in
above	(2) That on Loss Mitigation Reques		, I served a true and accurate copy of the
	—by notice of electror parties at the email add	=	e CM/ECF system upon the following
	—by first class mail up	oon the following part	ies at the addresses listed below:
	—by certified mail upo	on the following partic	es at the addresses listed below:
Dated:			
		,	Name
Sworn	to before me this		
	_ day of,	20	
Notary	Public, State of New Y	 Tork	