



## Notice of Intent to Cure Default

I am requesting the Public Trustee obtain a written statement of the amount necessary to cure the default on my loan. I understand cure payments must be in the form of a wire, cash, or a cashier's check made payable to the Denver County Public Trustee. I further understand payments must be made in full, as no partial payments are allowed, and that payment must be received prior to the deadline listed on the cure statement.

By filing this document, I am providing written notice of my intention to cure the default as one of the following:

The owner of the property

A junior lien holder

A person liable under  
the evidence of debt

A surety or guarantor  
of the evidence of debt

\_\_\_\_\_  
(Name of party with right to cure— please print)

\_\_\_\_\_  
(Signature of party with right to cure)

\_\_\_\_\_  
(Date Signed)

### Instructions to the Public Trustee

As the filer of this Intent to Cure, I am providing the following identifying information regarding my foreclosure:

\_\_\_\_\_  
Foreclosure Case Number

\_\_\_\_\_  
Address of Property in Foreclosure

and instruct the Denver County Public Trustee's office to obtain a cure statement from the foreclosing lender or their attorney and deliver its contents to the following points of contact:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

If a cure payment is made, and the cure payment results in a refund, the refund will be made payable to:

\_\_\_\_\_  
Name

And will be returned via first-class mail to the following address:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State Zip

Note: Notarization required in all cases except when signed in the presence of a Deputy Public Trustee. If signed in the presence of a Deputy Public Trustee, a state or federally issued ID must be presented.

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Subscribed and sworn to me on this  
\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

My commission expires: \_\_\_\_\_

seal

\_\_\_\_\_  
(Signature of Notary Public)