

Registration #

Foreclosure Application Form

SECTION 1- PROPERTY INFORMATION

Owner Name _____
Address _____ Lot & Block _____
Type of Rental _____ Number of Units _____

SECTION 2— FORCLOSURE INFORMATION

Company/Bank name _____
Owner/Officer Name _____ Title _____
Address _____ Fax _____
Phone _____ Business Phone _____ Cell Phone _____

**** If there are additional owners, use extra page****

SECTION 3 -PROPERTY MANAGER or LOCAL AGENT

Company Name (if applicable) _____
Contact Name: _____ Title: _____
Address: _____
Phone: _____ Business Phone: _____ Cell Phone: _____

SECTION 4— SIGNATURE

The information provided on this application is true and correct to the best of my knowledge:

Signature: _____ Date: _____