DATE

NAME
ADDRESS
CITY, STATE, ZIP

RE: Parcel Number

Mr. & Mrs.:

This letter is to inform you that under the terms of your deed of trust with BENEFICIARY, the BENEFICIARY may require that all or any portion of the net proceeds of $ paid to you by the Agency be applied to the indebtedness or the repair or restoration of your property.

In addition, the BENEFICIARY may also call your loan, which will require that you pay the amount owing in full.

By signing this letter, you acknowledge that I have informed you of the above possibilities, and you accept responsibility for payment to the BENEFICIARY if necessary.

Sincerely,

NAME

TITLE

***Receipt of this letter is hereby acknowledged.***

***I understand the conditions herein.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date