

THE STATE OF NEW HAMPSHIRE
OFFICE OF MEDIATION & ARBITRATION
JUDICIAL BRANCH
<http://www.courts.state.nh.us>

FORECLOSURE MEDIATION PROGRAM
NOTICE TO HOMEOWNER

Notice to Homeowner: Availability of Foreclosure Mediation: Mediation is a process by which a neutral mediator assists parties in trying to reach a voluntary negotiated agreement to resolve their dispute

A **Foreclosure Mediation Program** has been set up by the NH Judicial Branch Office of Mediation and Arbitration to assist certain qualifying homeowners.

You can request screening for eligibility for the program if:

- you are the owner-occupant of a one-to-four family residential property in New Hampshire which is your primary residence; and
- you are the borrower, or one of the borrowers; and
- the mortgage on your owner-occupied residential property is at risk of foreclosure, as determined by your lender, or there is a current default;
- you do not qualify for another direct lender program such as the federal home rescue program or other like programs; and
- After screening and acceptance into the program, you and your lender agree to participate in the Foreclosure Mediation Program.

To participate in the **Foreclosure Mediation Program**, you must complete the attached **Foreclosure Mediation Request form**, (NHJB-2604 OMA), and **send it to your lender for screening with a copy to the Office of Mediation and Arbitration at P.O. Box 389, Concord, NH 03302.**

NH Court contracted mediators will conduct mediation sessions at the Superior or District Court locations throughout the state or at regional HUD certified counseling offices.

There is no application fee for this program and mediation services shall be provided at no cost to the participants for so long as there are grant or other funds available to support the program. The OMA reserves the right to cancel the program, at any time if funds are no longer available.

FORECLOSURE MEDIATION – NOTICE TO HOMEOWNER

Instructions to Homeowner Applicant If you want to use the Foreclosure Mediation Program:

Fill out this Request form and send it to your lender, with a copy to the Office of Mediation and Arbitration: P.O. Box 389, Concord, NH 03302 not less than 60 days before the currently scheduled foreclosure date, if any.

PLEASE: Type or Print Legibly

Name of Lender and Servicer, if applicable

Account #

Address:

Foreclosure date, if applicable

Foreclosure Deed Recording Book/Page if known

County

NOTE THAT THIS REQUEST DOES NOT ACT TO STAY OR STOP THE FORECLOSURE

Homeowner(s) Information:

Your name(s) and names of all borrowers		
Address (number, street, town, state, zip code (of each))		
Phone Number: ()	Business Phone: ()	Cell Phone: ()

- Is this property your primary residence? Yes No
- Is it a one-to-four family residential property located in NH? Yes No
- Are you one of the borrowers? Yes No
- Is this a mortgage at risk of default or foreclosure or do you anticipate a default or foreclosure? Yes No
- Have you met with a NH HUD approved counselor? Yes No
- Have you applied for another Foreclosure prevention program? Yes No

If you answered "No" to any of these questions, please do not submit this Request, as you do not qualify for the Foreclosure Mediation Program.

I request foreclosure mediation in my case: I understand that my application will be screened by my lender who will determine my eligibility for the Foreclosure Mediation Program. I am to send relevant (summary) financial information, and verification that I have met with a NH HUD approved counselor, to the lender or servicer, their counsel, each if known, no less than 7 business days preceding a scheduled mediation session.

Signed	Print Name of Person Signing	Date Signed
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I certify that a copy of this Request was mailed or delivered to the lender and servicer, if known.	Date mailed or delivered
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Signed (Attorney or self-represented party)	Print Name of Person Signing	Phone Number
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Address (Number, street, town, state, zip code)

Name and address of each person to whom this notice was mailed or delivered. (All lenders, servicers, attorneys, law firms (if known)):

Name (each party served)	Address (Where party was served)

*If necessary, attach additional sheet with name of each party served and the address at which service was made.