

STATE OF MAINE

SUPERIOR COURT

DISTRICT COURT

_____, ss

Location: _____

Docket No. _____

Docket No. _____

Plaintiff

**DEFENDANT'S
FORECLOSURE MEDIATION
INFORMATION**

v.

Defendant

The defendant homeowner(s), (by and through undersigned counsel) submit(s) the following information:

A. Name, current address, telephone number and other contact information for the homeowner: _____

B. Has the homeowner moved out of the property under foreclosure?
 Yes No
If yes, when? _____

C. This homeowner's gross monthly income, from all sources, as a preliminary estimate for mediation purposes: \$_____

D. Homeowner's goal(s) for the property (if known): Retain the home
 Sell or deed over to bank.

Dated: _____ Signature: _____

Printed Name: _____

Name, title, and telephone number of person who prepared this form: _____

DEFENDANT MUST FILE A COMPLETED COPY OF THIS FORM WITH THE COURT AND PROVIDE A COMPLETED COPY OF THIS FORM TO PLAINTIFF'S ATTORNEY ON THE DATE OF INFORMATIONAL SESSION AND MEDIATION.