

1 **PET**

2 _____
(Homeowner(s)' name)

3 _____
(Homeowner(s)' mailing address)

4 _____
(Homeowner(s)' city, state, zip code)

5 _____
(Homeowner(s)' telephone number)

6 _____
(Homeowner(s)' e-mail address)

7 Petitioner(s), In Proper Person

8 **EIGHTH JUDICIAL DISTRICT COURT**
9 **CLARK COUNTY, NEVADA**

11 _____,
12 Petitioner(s),
13 vs.
14 _____,
15 Respondent(s).
16

Case No.: _____
Dept. No.: _____

17 **PETITION FOR FORECLOSURE MEDIATION ASSISTANCE**

18 Petitioner(s) (insert your name(s)) _____ (hereafter "Petitioner(s)"),
19 hereby petition(s) this Court, pursuant to the terms of Chapter 107 of the Nevada Revised
20 Statutes, to grant participation in the mediation program for homeowners facing foreclosure.
21

22 Petitioner(s) state(s) as follows:

- 23 1. **Residence.** The home that is under foreclosure proceedings is in the county of (insert county
24 where property is located) _____ in the State of Nevada. Petitioner(s) is/are the
25 occupant(s) and owner(s) of this home.
- 26 2. **APN.** The Assessor's Parcel Number (APN) of the Property is (insert APN):
27 _____
- 28 3. **Notice of Default.** The Notice of Default is attached to this petition. The Notice of
28 Default was received within the last thirty (30) days.

1 4. Mediation Fee. The required \$250.00 mediation fee is submitted herewith.

2 Petitioner(s) hereby request(s) that this Court allow participation in the foreclosure
3 mediation assistance program.

4 DATED this _____ day of _____, 20_____.

5 Submitted by:

6 _____
7 *(Homeowner One's signature)*

8 _____
9 *(Homeowner One's name)*

10 Petitioner, In Proper Person

11 DATED this _____ day of _____, 20_____.

12 Submitted by:

13 _____
14 *(Homeowner Two's signature)*

15 _____
16 *(Homeowner Two's name)*

17 Petitioner, In Proper Person
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CERTIFICATE OF MAILING

I hereby certify that on this _____ day of _____, 20____, I served the foregoing Petition for Foreclosure Mediation Assistance via certified mail, return receipt requested, to the following:

TRUSTEE: *(Insert name and address of trustee)*

BENEFICIARY: *(Insert name and address of beneficiary of the deed)*

Home Means Nevada
3300 W. Sahara Ave.
Las Vegas, NV 89102

OTHER PARTY OF INTEREST: *(Insert name and address of any other interested party)*

DATED this _____ day of _____, 20__

Signature of Person Mailing Document

Printed Name