

IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT  
IN AND FOR PALM BEACH COUNTY, FLORIDA

ADMINISTRATIVE ORDER NO. 3.305-7/10\*

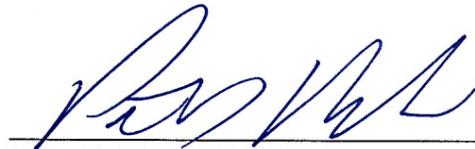
IN RE: HOMESTEAD FORECLOSURE ACTIONS  
BY INSTITUTIONAL LENDERS

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Administrative Order 3.305-1/09 is obsolete due to the newly implemented managed mediation program.

**NOW THEREFORE**, it is hereby **ORDERED** that Administrative Order 3.305-1/09 is vacated and set aside.

**DONE AND SIGNED** in Chambers at West Palm Beach, Palm Beach County, Florida this 16 day of July, 2010.

  
\_\_\_\_\_  
Peter D. Blanc, Chief Judge

\*supersedes admin. order 3.305-1/09\*

**EXHIBIT "A"**  
**NOTICE TO HOMEOWNER**

**Note: Please read Exhibits B, C, D, & E**

**IMPORTANT NOTICE TO HOMEOWNER**

A FORECLOSURE ACTION HAS BEEN  
FILED AGAINST YOU  
YOU HAVE RIGHTS DURING THE FORECLOSURE

**LEGAL**

You are urged to seek legal counsel to protect your rights and your home. If you are able to afford an attorney, you may contact the Palm Beach County Bar Association Lawyer Referral Service at 561-687-3266 or 561-4513256 (Boca/Delray)

**If you cannot afford an attorney, you may contact your local legal aid or legal services provider.**

Legal Aid Society of Palm Beach County, Inc.	561-655-8944
Florida Rural Legal Services, Inc.	561-820-8902
	561-993-0003 (Belle Glade)

**HOUSING COUNSELING**

Acorn Housing Corporation	561-588-7618
Consumer Credit Counseling Services, Inc.	800-251-2227
Credit Card Management Services	561-472-8000
Delray Community Development Corporation	561-266-9840
Housing Partnership, Inc.	561-841-3500
Life Improvement for Tomorrow, Inc.	561-868-7026
Urban League of Palm Beach County, Inc.	561-833-1461
Hope Now	888-995-HOPE
Housing Leadership Council of Palm Beach County	561-653-4107

**One or more of the following options may be available to help you save your home. Contact a Housing Counseling agency to find out additional information.**

**Reinstatement:** Repayment of the total amount that you are behind in a lump sum payment.

**Forbearance:** Temporary reduction or suspension of your mortgage payments.

**Repayment Plan:** Agreement that allows the homeowner to repay the amount that you are behind gradually while making your regularly scheduled monthly payments.

**Loan Modification:** Written agreement that permanently changes one or more of the original terms of your mortgage to make the payments more affordable.

**Short Sale:** Lender may allow you to sell the home for less than the total amount owed on the mortgage. If lender agrees to the short sale, the remaining portion of the mortgage that exceeds the net proceeds from the sale will be written off by the lender.

**Deed-in-lieu of Foreclosure:** Lender will cancel the mortgage if the homeowner voluntarily transfers the title of the property to the mortgage lender.

**AVOID FORECLOSURE RESCUE SCAMS:** You may be contacted by individuals or companies that claim they can save your home from foreclosure. Please seek legal advice before you sign any documents or pay money to anyone offering to save your home from foreclosure. If you think that you have been a victim of a foreclosure scam, you may call one of the following numbers for assistance:

Florida Department of Financial Regulation	1-800-342-2762
Federal Trade Commission	1-877-382-4357
Office of the Attorney General	1-866-966-7266
Consumer Services Division of Florida Department of Agriculture	1-800-435-7352

## INFORMACION IMPORTANTE PARA LOS DUEÑOS DE VIVIENDA

UN AVISO DE REPOSECION DE SU VIVIENDA SE HA INICIADO EN CONTRA SUYA USTED TIENE DERECHOS DURANTE EL PROCESO DE REPOSECION

### **LEGAL**

Usted debe buscar consejo legal para proteger sus derechos y su vivienda. Si usted puede pagar un abogado, puede contactar the Palm Beach County Bar Association Lawyer Referral Service al (561) 687-3266 ó (561) 451-3256 (Boca/Delrey).

**Si usted no puede pagar un abogado, puede contactar su agencia local de ayuda legal ó proveedor de servicios legales.**

Legal Aid Society of Palm Beach County, Inc.

561 655-8944

Florida Rural Legal Services, Inc.

561 820-8902

561 993-0003 (Belle Glade)

### **AGENCIAS DE ASESORAMIENTO VIVIENDA**

Acorn Housing Corporation

561-588-7618

Consumer Credit Counseling Services, Inc.

800-251-2227

Credit Card Management Services

561-472-8000

Delray Community Development Corporation

561-266-9840

Housing Partnership, Inc.

561-841-3500

Life Improvement for Tomorrow, Inc.

561-868-7026

Urban League of Palm Beach County, Inc.

561-833-1461

Hope Now

888-995-HOPE

Housing Leadership Council of Palm Beach County

561-653-4107

Una ó más de las siguientes opciones estarán a su disposición para ayudarlo a salvar su casa. Contacte una agencia de Asesoramiento de Vivienda para encontrar información adicional.

**Reestablecimiento:** Reembolso de la cantidad total atrasada en un solo pago.

**Tolerancia/Paciencia:** Reducción o suspensión temporal de sus pagos de hipoteca.

**Plan de reembolso:** Acuerdo que permite al dueño de la vivienda pagar la cantidad que está atrasado gradualmente, mientras que hace el pago acordado o programado de su cuota mensual regularmente.

**Modificación del Préstamo:** Acuerdo escrito que cambia permanentemente uno ó mas de los terminos originales de su hipoteca, para hacer pagos que usted pueda pagar.

**Yenta Corta:** El banco puede permitirle vender su casa por menos del valor que usted debe de la hipoteca. El banco aprueba la venta corta, la porción restante de la hipoteca, después del valor de venta de la casa será asumida por el banco.

**Deed-in-lien of Foreclosure:** El banco cancelara la hipoteca si el propietario voluntariamente transfiere el título de propiedad al banco.

**EVITE ENGAÑOS SOBRE EL TRATAR DE SALVAR SU PROPIEDAD DE LA REPOSECION:** Usted puede ser contactado por individuos o compañías que ofrecen salvar su casa de la reposición. Por favor busque consejo legal antes de firmar cualquier documento o antes de pagar dinero a cualquiera que se ofrezca a salvar su casa de la reposición. Si usted piensa que ha sido víctima de un engaño sobre la reposicion de su vivienda, puede contactar uno de los siguientes numeros para asistencia.

Florida Department of Financial Regulation

1-800-342-2762

Federal Trade Commission

1-877-382-4357

Office of the Attorney General

1-866-966-7266

Consumer Services Division of the Fla. Dept. Of Agriculture

1-800-435-7352

**Exhibit "A" - NOTICE TO HOMEOWNER**



**IMPORTAN POU MOUN KI GIN KAY  
MIN ACTION BANK YO PRAN POU YO SEZI KAY OU.  
GINYIN LWA POU MOUN TANKOU-W POU SI BANK YO TA VLE SEZI KAY OU**

**LEGAL - NOU MANDE POU-W CHACHE YON AVOKA POU-W MANDE KI DWA OU GINYIN. SI OU GIN KOB POU-W PRAN YON AVOKA, OU MET RELE PALM BEACH COUNTY BAR ASSOCIATION LAWYER REFERRAL SERVICE NAN NIMERO SA 561-687-3266 OUBYEN 561-451-3256 (SI OU RETE DELRAY/BOCA RATON)**

**SI OU PA GIN KOB POU YON AVOKA RELE:**

LEGAL AID SOCIETY OF PALM BEACH COUNTY, INC.	561-655-8944
FLORIDA RURAL LEGAL AID SERVICES, INC.	561-820-8902
	(BELLE GLADE) 561-993-0003

**COMPANI OU KA RELE POU-W MANDE INFORMASION**

ACORN HOUSING CORPORATION	561-588-7618
CONSUMER CREDIT COUNSELING SERVICES, INC.	800-251-2227
CREDIT CARD MANAGEMENT SERVICES	561-472-8000
DELRAY COMMUNITY DEVELOPMENT CORP.	561-266-9840
HOUSING PARTNERSHIP, INC.	561-841-3500
LIFE IMPROVEMENT FOR TOMORROW, INC.	561-868-7026
URBAN LEAGUE OF PALM BEACH COUNTY, INC.	561-833-1461
HOPE NOW	888-995-HOPE
HOUSING LEADERSHIP COUNCIL OF PALM BEACH COUNTY	561-563-4107

**OU GINYIN YOUN OUBYEN PLUS OPTION KI KAPAB DISPONIBE POU EDE-W KINBE KAY OU  
REINSTATEMENT: POU-W PEYE TOUTE KOB OU TE DWE YO**

**FORBEARANCE: YAP REDUI OUBYEN SUSPANN KOB OU KONN PEYE KAY LA CHAK MWA POU YON TI TAN**

**REPAYMENT PLAN: YON PLAN KI PERMET MET KAY LA PEYE TOUTE KOB LI TE DWE YO AN TI MOSO EPI TOUTE KOB OU KONN PEYE CHAK MWA.**

**LOAN MODIFICATION: YON NOUVEL ANGAGEMENTAN SOU PAPIE KAP PERMET OU CHANGE KEK BAGAY NAN PREMIE ANGAGEMENTAN POU-W KAPAB PEYE KAY LA PI FASIL**

**SHORT SALE: ANPIL BANK KA PERMET OU POU-W VAN KAY LA POU YON TI KOB KI PI PITI KE SA OU DWE A. SI BANK LA ACEPTE ANPIL FWA YO PAP PENALIZE-W POU RES KOB YO PEDI A.**

**DEED-IN-LIEU OF FORCLOSURE: ANPIL FWA BANK YO ACEPTE POU-W TRANSFERE PAPIE KAY LA SOU NON YO POU YO KAPAB RETIRE KAY LA SOU NON-W**

**POU EVITE VOLEUR: TOUJOU CONTACTE YON MOUN OU BIEN YON AVOKA KI KAPABE EDE OU. PA SIYIN PAPIE EPI PA BAY KOB AK MOUN KI PA GINYIN YON KOMPANI KE GOUVERNEMAN REKONET. VEYE VOLEUR.**

**SI OU PANSE OU SE YON VIKTIM KI TE PRAN KOU DEJA NAN MEN YOUN NAN MOUN SA YO, OU MET RELE YOUN NAN NIMERO SA YO POU YO KA EDE-W.**

FLORIDA DEPARTMENT OF FINANCIAL REGULATION	800-342-2762
FEDERAL TRADE COMMISSION	877-382-4357
OFFICE OF THE ATTORNEY GENERAL	866-966-7266
FLA. DEPT. OF AGRICULTURE	800-435-7352

**Exhibit "A" - NOTICE TO HOMEOWNER**

<b>EXHIBIT "B" PLAINTIFF/LENDER'S LOSS MITIGATION INFORMATION</b>
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**PLAINTIFF/LENDER'S LOSS MITIGATION INFORMATION**

Lender's Name:

Phone Number:

Fax Number:

Address:

Amount Due:

**PLEASE BE ADVISED:** The "Amount Due" that is listed above is subject to change. The amount required to payoff the amounts due under your Note and Mortgage will be higher. In the event you request a modification of your loan, you will receive an updated breakdown of all amounts due to payoff or reinstate the Note and Mortgage. For more information on requesting a loan modification, please see the *Defendant/Borrower's Foreclosure Questionnaire (Exhibit "C")* and *Financial Statement (Exhibit "D")* documents which can be found on the attached pages.

This debt information is being provided pursuant to the Fifteenth Judicial Circuit's Administrative Order No. 3.305 1/09 (as amended)

**EXHIBIT "C"**  
**FORECLOSURE QUESTIONNAIRE**

**DEFENDANT/BORROWER'S FORECLOSURE QUESTIONNAIRE**  
**For Loan Modification Requests and Short Sale Applicants**

Name of Borrower(s): \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ (daytime) \_\_\_\_\_ (evening)

Address: \_\_\_\_\_

**DIRECTIONS:** To request a ***LOAN MODIFICATION*** from your lender ***or*** if you are a ***SHORT SALE APPLICANT*** (a sale on your home is pending), follow the step-by-step directions below. You must complete this page and submit all required documentation within 14 days of filing your Answer (response to the Complaint).

**NOTE: THIS IS NOT AN ANSWER TO THE COMPLAINT FOR FORECLOSURE**

1. **Gather** clear **copies** of the following documents for submission to the Plaintiff/Lender's Attorney (do NOT send the original or your only copies of documents). If you are requesting a loan modification from your lender, refer to "Column A". If you are a short sale applicant, refer to "Column B".

<u>Column A:</u> <b>LOAN MODIFICATION REQUEST</b>	<u>Column B:</u> <b>SHORT SALE APPLICANT</b>
<b><u>Required Documents:</u></b> a. Two years tax returns <i>and</i> b. Proof of current employment (three months wage slips or other proof) <i>and</i> c. Proof that you reside in the property (last month electric, phone or water bill)	<b><u>Required Documents:</u></b> a. Executed Sales Contract <i>and</i> b. Proposed HUD-1

2. **Complete** the "Financial Statement" (Exhibit "D").
3. **Return or Mail** the following to the Plaintiff/Lender's Attorney (mailing address can be found on the Summons or on the last page of the Complaint for Foreclosure):
- This form (Exhibit "C")
  - The required documents found in Column A (loan modification) or Column B (short sale) above
  - The Financial Statement to the Plaintiff/Lender's Attorney (Exhibit "D")
4. **Complete and File the Attached "Defendant's Notice of Compliance" (Exhibit "E") with the Clerk of Court** at: Clerk of Court, Circuit/Civil Division, 205 North Dixie Highway, West Palm Beach, Florida 33401. **Note:** Only the "Defendant's Notice of Compliance" (Exhibit "E") should be filed with the Clerk of Court. Do **NOT** file the financial documents with the Clerk of Court.

**Your Rights:** The Plaintiff/Lender's Attorney is a debt collector and is attempting to collect a debt from you. The information obtained from the documents you may submit may be admissible in court and used for the purpose of collecting the alleged debt.



**EXHIBIT "D"**  
**FINANCIAL STATEMENT**

**BORROWER INFORMATION**

Account # \_\_\_\_\_ Reason for Delinquency \_\_\_\_\_

Have you contacted a Consumer Credit Counseling Agency? \_\_\_\_\_

If "Yes" Agency Name and Contact Number: \_\_\_\_\_

Borrower Name: \_\_\_\_\_  
Co-Borrower Name: \_\_\_\_\_  
Mortgaged Prop. Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Other Phone: \_\_\_\_\_

**EMPLOYMENT INFORMATION**

**BORROWER**

**CO-BORROWER**

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_  
Emp. Address: \_\_\_\_\_ Emp. Address: \_\_\_\_\_  
Emp. Phone: \_\_\_\_\_ Emp. Phone: \_\_\_\_\_  
Job Position: \_\_\_\_\_ Job Position: \_\_\_\_\_

**BANKRUPTCY INFORMATION**

Chapter Type: \_\_\_\_\_ Attorney Name: \_\_\_\_\_  
Filing Date: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Case #: \_\_\_\_\_ Active: Yes: \_\_\_\_\_ No: \_\_\_\_\_

**ASSETS/LIABILITIES**

DESCRIPTION	ESTIMATED VALUE	AMOUNT OWED	NET VALUE
Primary Residence Address: _____	\$ _____	\$ _____	\$ _____
Number of dependents living on the property _____			
Number of persons living on the property _____			
Is the property listed for sale? _____ If Yes please list Agent name and contact phone number: _____			
Listing Price \$ _____			
Other Real Property Address: _____			
Number of Automobiles Owned _____ Automobile Make/Model: _____			

DESCRIPTION	ESTIMATED VALUE	AMOUNT OWED	NET VALUE
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Automobile Make/Model:	\$	\$	\$
Bank Accounts --Checking:			
Bank Accounts - Savings:			
IRA/KEOGH Accounts:	\$	\$	\$
401K Savings Plan:			
Stocks / Bonds / CDs:			
Boats	\$	\$	\$
Cash Value of Life Insurance:			
Face Value of Life Insurance			
Collections / Art / Coins, Etc:	\$	\$	\$

Computers:			
Other:			
Other:			
Other:			
Other:			

#### INCOME DATA

DESCRIPTION	INCOME		TOTAL
Gross Salary / Wages:	\$	\$	\$
Overtime Pay:			
Commissions:			
Bonuses:	\$	\$	\$
Alimony / Child Support:			
Rental Property:			
Interest / Dividends: Savings Accounts:	\$	\$	\$
Life Insurance:			
Stocks/Bonds:			
"Less" Taxes: Federal Income Tax:	\$	\$	\$
FICA:			
State Income Tax:			
Other:	\$	\$	\$
Other Deductions (Specify):			
Other Income (Specify):			
Other Income(Specify):			
<b>NET INCOME:</b>	\$	\$	\$

DESCRIPTION	MONTHLY PYMT\$	BALANCE DUE	# MONTHS DELINQ.
Mortgage and Land Contract:	\$	\$	
Other Mortgage(s)			
Child Care			
Alimony / Child Support	\$	\$	



DESCRIPTION	MONTHLY PYMT\$	BALANCE DUE	# MONTHS DELINQ.
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Automobile Loan:			
Automobile Loan:			
Finance Company:	\$	\$	
Installment:			
Other Loan (Specify):			
Visa:	\$	\$	\$
MasterCard:			
Other Credit Card (Specify):			
Other Credit Card (Specify):			
Cooperative (COOP) Fees:			
Garnishment/Levy:			
Hazard Insurance (rental & residence):			
HOA. Special Assessment:			
HOA / Condo Maintenance:			
IRS Tax Payment			
School Tuition:			
Taxes:			
Utilities (rental & residence):			
Automobile Insurance:			
Health Insurance:			
Life Insurance:			
Church:			
Club or Union Dues:			
Doctor/Dentist:			
Pharmaceutical Drugs:			
Hospital:			
Gasoline (Auto):			
Auto Maintenance:			
Monthly Parking:			
Food/ Groceries (Family):			
School or Work Lunches Purchased:			
New Clothes/Shoes:			
Dry Cleaning:			
Spending Money:			
Cable TV:			
Clubs, Sports & Hobbies:			
Entertainment (Movies, Dinner, Etc.):			
Vacations:			
Other (Please Specify):			
Other (Please Specify):			
Other (Please Specify):			
Other (Please Specify):			
Other (Please Specify):			
<b>TOTAL:</b>	\$	\$	\$

## AUTHORIZATION AND ACKNOWLEDGEMENT

I obtained a Mortgage Loan secured by the above referenced mortgaged property. I certify that all information presented herein as well as attachments are true, accurate and correct to the best of my knowledge. I understand that submission of this information in no way obligates my mortgage servicer, owner of my mortgage or insurer to provide assistance to me.

By signing this Financial Statement, I hereby authorize my mortgage servicer and/or mortgage insurer to: 1) order a credit report from any credit reporting agency; 2) verify, when deemed necessary, any current or previous employment, bank accounts, tax returns, or assets; 3) contact my real estate agent and/or credit counseling service representative (if applicable); 4) release any and all information concerning the above.

I agree that the financial information provided herein is incorrect and such errors have induced actions by the mortgage servicer, owner of my mortgage or mortgage insurer that would not have been taken, had the true facts been known, I shall be liable for any or all losses or damages to those persons.

YOU SHOULD CONSIDER THIS LETTER AS COMING FROM A DEBT COLLECTOR AS WE SOMETIMES ACT AS A DEBT COLLECTOR. ANY INFORMATION PROVIDED BY YOU WILL BE USED TO COLLECT THIS DEBT. HOWEVER, IF YOU ARE IN BANKRUPTCY OR RECEIVED A BANKRUPTCY DISCHARGE OF THIS DEBT, THIS LETTER IS NOT AN ATTEMPT TO COLLECT THE DEBT, BUT NOTICE OF POSSIBLE ENFORCEMENT OF OUR LIEN AGAINST THE COLLATERAL PROPERTY.

PLEASE SIGN BELOW

\_\_\_\_\_  
Borrower

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-borrower

\_\_\_\_\_  
Date

**EXHIBIT "E"**  
**NOTICE OF COMPLIANCE**

IN THE CIRCUIT COURT OF THE FIFTEENTH JUDICIAL CIRCUIT  
IN AND FOR PALM BEACH COUNTY, FLORIDA

CASE NO.: XX-XXXX-CA-XXXX

NAME,  
Plaintiff,

v.

NAME,  
Defendant.

\_\_\_\_\_ /

**DEFENDANT'S NOTICE OF COMPLIANCE WITH**  
**ADMINISTRATIVE ORDER NO. 3.305**

PLEASE TAKE NOTICE that the below named Defendant has complied with Administrative Order 3.305-10/08 by forwarding the Defendant's Foreclosure Questionnaire to Counsel of record for the Plaintiff this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

I HEREBY CERTIFY that a true and correct copy of this Notice of Compliance was sent to Plaintiff's counsel (include Plaintiff's Counsel this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

By: \_\_\_\_\_  
Borrower's Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Address

**FILE THIS DOCUMENT WITH THE CLERK'S OFFICE –**  
**NO DOCUMENTS ARE TO BE ATTACHED TO THIS NOTICE**

**MAIL A COPY TO THE PLAINTIFF'S ATTORNEY**

**RETAIN A COPY FOR YOUR RECORDS**



**EXHIBIT "F"**  
**CERTIFICATE OF SETTLEMENT**  
**AUTHORITY FOR MEDIATION**

IN THE CIRCUIT FOR THE FIFTEENTH JUDICIAL CIRCUIT  
IN AND FOR PALM BEACH COUNTY, FLORIDA

CASE NO.:

Plaintiff,

vs.

Defendant.

\_\_\_\_\_:

**CERTIFICATION OF SETTLEMENT AUTHORITY**

THE UNDERSIGNED COUNSEL, as counsel of record in this cause and as an officer of the court, pursuant to the Administrative Order of the Chief Judge of the Fifteenth Judicial Circuit, does hereby certify as follows:

1. Mediation has been scheduled in this cause as ordered.
2. The plaintiff/lender will be represented by \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ by personal appearance.  
\_\_\_\_\_ by telephone at \_\_\_\_\_ (toll free phone # )
3. The plaintiff's representative's relationship to the plaintiff/lender is: \_\_\_\_\_  
\_\_\_\_\_
4. The undersigned has personally spoken with the above-designated representative and said representative has confirmed that the person has full settlement authority.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Bar Number: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel. No. \_\_\_\_\_