DATE: [Insert Date]

FROM:
[Lender Name]
[Lender Address]
[City, State, Zip Code]
[Phone Number]

TO:
[Borrower Name]
[Property Address]
[City, State, Zip Code]

RE: NOTICE OF RIGHT TO CURE DEFAULT

Account Number: [Insert Account Number]

Dear [Borrower Name],

This letter serves as official notice that your mortgage loan is in default because you have failed to make the required payments. As of the date of this letter, your account is past due for the following period: [Insert Dates of Default].

Total Amount Required to Cure Default: $[Insert Amount]

The total amount listed above includes the following:

- Past Due Payments: $[Amount]
- Late Fees: $[Amount]
- Other Charges/Costs: $[Amount]

Your Right to Cure:
You have the right to cure this default and avoid the commencement of foreclosure proceedings. To exercise this right, you must pay the total amount listed above on or before **[Insert Deadline Date]**.

Consequences of Failure to Cure:
If you do not pay the full amount required to cure this default by the deadline stated above, the Lender intends to accelerate the maturity of the loan and initiate formal foreclosure proceedings to sell your property.

Method of Payment:
Payment must be made by certified check, cashier's check, or money order payable to [Lender Name]. Please deliver payment to the following address: [Insert Payment Address].

If you believe you are not in default or if you have questions regarding the amount due, please contact our Loss Mitigation Department immediately at [Insert Phone Number].

Sincerely,

[Authorized Representative Name]
[Title]
[Lender Name]