

**California and Nevada Referrals may be sent to:**

**MALIBU RECONVEYANCE, LLC, TRUSTEE COMPANY**

**Attn: New Foreclosures**

**P.O. BOX 4987**

**CHATSWORTH, CA 91313-4987**

**Phone: (818) 772-2242**

**or via fax # (818) 772-6622 via email – [siboney.am@maliburecon.com](mailto:siboney.am@maliburecon.com)**

**Foreclosure Checklist**

- Loan information including payoff statement (including principal balance, due date, last payment received, date of default, (payment due and not received) and interest rate)
- Borrower's Social Security Number and all known mailing addresses
- Property address OR Vacant Land if applicable
- Legal description; APN Number
- Copies of:
  - Note
  - Deed of Trust (first Page ok)
  - Assignments (if applicable)
  - Demand/acceleration letter / Default Letter (if required) or (Collection Letter)
  - Copy of Title Policy
- In addition, please indicate: Your Name if you are an agent
  - Entity/ Beneficiary to file Foreclosure on behalf of:
  - Contact name and email address
  - Billing address

**Thank you for your referral and please feel free to call us for any questions or concerns**