

DATE: [Date]

SENT VIA: [Certified Mail / Return Receipt Requested]

TO:

[Borrower Name]

[Co-Borrower Name]

[Property Address]

[City, State, Zip Code]

RE: FINAL DEMAND AND MORTGAGE ACCELERATION NOTICE

Loan Number: [Account Number]

Property Address: [Full Property Address]

Dear [Borrower Name],

This letter serves as formal notice that you are in default under the terms of your Mortgage/Deed of Trust and Promissory Note for the property referenced above. Specifically, you have failed to make the required monthly payments starting from [Date of First Unpaid Installment].

Despite previous notices, you have failed to cure this default. As of the date of this letter, the total amount required to bring your account current is \$[Total Arrearage Amount]. This amount includes past due principal, interest, late fees, and any applicable costs.

NOTICE OF ACCELERATION:

If the full amount of \$[Total Arrearage Amount] is not received by this office on or before [Deadline Date - e.g., 30 days from notice], the Lender hereby exercises its option to **ACCELERATE** the entire unpaid balance of your loan. This means the full remaining principal balance of \$[Current Principal Balance], plus all accrued interest and fees, will become immediately due and payable in full.

FAILURE TO CURE:

Failure to pay the total amount due by the deadline stated above will result in the commencement of legal proceedings to foreclose upon the property. Should foreclosure occur, you may lose your interest in the property and be required to vacate the premises.

RIGHT TO REINSTATE:

You may have the right to reinstate your loan after acceleration and the right to assert the non-existence of a default or any other defense in a foreclosure proceeding. Please refer to your original loan documents for specific details regarding these rights.

Please send the required funds in the form of a certified check or money order made payable to [Lender Name] to the address listed below:

[Lender Name/Service Name]
[Payment Mailing Address]
[City, State, Zip Code]

If you have any questions or wish to discuss loss mitigation options, please contact our Loss Mitigation Department immediately at [Phone Number].

Sincerely,

[Authorized Signature]
[Printed Name and Title]
[Lender/Service Name]