

# LOS ANGELES HOUSING DEPARTMENT (LAHD)

## FORECLOSURE REGISTRY PROGRAM

### Administrative Penalty Appeal



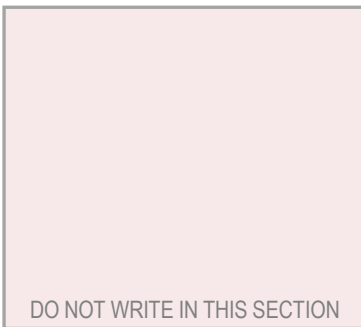
Eric Garcetti, Mayor

**Please note: It is the obligation of the lender, REO owner, or designated agent(s) to pay annual fees, one-time proactive inspection fees (for REO properties only), and to update current contact information with the Department.**

**CRITERIA    FILL IN THE APPROPRIATE BUBBLE**

1. Individual (Natural Person) Lender/REO Owner - not an institution, trust, or other organized entity
2. Property not subject to the Ordinance due to Canceling Documents recorded with LA County prior to or during the Notice of Non-Compliance (NNC) penalty period\*
3. Active Bankruptcy (BK) Cases linked to the property in foreclosure with stay protection for the creditor (lender/REO Owner) that are filed prior to or during the NNC penalty period \*
4. Any Court Order effectively voiding the foreclosure issued prior to or during the NNC penalty period\*
5. Department Error - Issue must be valid, described in full, and documented.

(\*Please note: For criteria 2-4 above, if canceling documents are recorded, BKs filed, or Court Orders issued **during** the penalty period, only partial adjustment is possible. Full adjustments require foreclosure status change or BK filing **prior** to invoice.



**THIS APPEAL FORM IS TO DISPUTE INVOICES WITH PENALTY FEES ONLY**

Registration/REO fees (*if required*) must be paid before filing the appeal. (*unless the invoice has been referred to a collections agency*)

\$155 Registration fee and \$356 REO Inspection fee PAID?     YES     NO

Assessor's Parcel # (APN): \_\_\_\_\_ Invoice ID: \_\_\_\_\_

Property (Site) Address: \_\_\_\_\_

Lender / REO Owner Name: \_\_\_\_\_

Lender/ REO Owner or Agent's Mailing Address: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Please turn page to document your justification and for additional information.**

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Lender/Owner \_\_\_\_\_  
(Or authorized agent/representative)

Print name \_\_\_\_\_

Date \_\_\_\_\_

**Please mail or email the completed form and supporting documents to:**

CITY of LOS ANGELES -  
LAHD Foreclosure Registry  
P.O. Box 17190  
Los Angeles, CA 90017-0790

**Email to**  
**LAHD.foreclosurereg@lacity.org**

- OFFICIAL USE ONLY -

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_

Approved     Denied:     Registration fee unpaid     No Documentation/Insufficient Documentation

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_ Adj. Amount: \$ \_\_\_\_\_

