



CITY OF CARSON

COMMUNITY DEVELOPMENT DEPARTMENT FORECLOSURE MANAGEMENT UNIT

FORECLOSED PROPERTY REGISTRATION APPLICATION

City of Carson

701 E Carson Street

Community Development Department

Foreclosure Management Unit

(310) 952-1756**foreclosure@carson.ca.us**

Building Division Application No.: _____

Date Application Accepted By

Community Development Dept _____

By: _____

Date Copy of Application Provide to**Beneficiary:** _____**Neighbor Contact No. 1:** _____*Phone No.:* _____**Neighbor Contact No. 2:** _____*Phone No.:* _____**Special Conditions Added****By City of Carson:** Yes No

(Space Above Line For Use By City)

**CITY OF CARSON
FORECLOSED PROPERTY
REGISTRATION APPLICATION**

The City of Carson (the "City") has enacted Article V of Chapter 7 and Article V of Chapter 9 of the Carson Municipal Code (CMC)...



CITY OF CARSON

COMMUNITY DEVELOPMENT DEPARTMENT FORECLOSURE MANAGEMENT UNIT

...to establish a property in foreclosure registration program as a mechanism to protect neighborhoods from becoming blighted through the lack of adequate maintenance and security of abandoned or unoccupied properties which are being held by a beneficiary following the completion of a foreclosure proceeding, pending sale by the beneficiary or pending lease by the beneficiary and occupancy of the unoccupied structure.

If the beneficiary or holder of a mortgage security interest in property subject to lien foreclosure proceedings (the "Beneficiary") or any other interested person, including the Declarant identified in Part 16 of this Application, has any question regarding the City property in foreclosure registration program, please contact Foreclosure Management Unit at the City of Carson at (310) 988-5758 or send an email to foreclosure@carson.ca.us and put into the email subject line the words "Foreclosed Property Inquiry".

This Property in Foreclosure Registration Application (the "Application") shall be deemed to be complete by the City, when the information required below has been provided to the City, the registration fee amount set forth in Part 17 below has been paid to the City and the Community Development Department of the City has accepted this Application, as indicated at Part 18, below.

A complete Application and the accompanying fee should be delivered to Community Development Department: Foreclosure Management Unit at Carson City Hall, 701 E Carson Street, Carson, California 90745.

The information set forth below in this Application needs to be provided to the City by the Beneficiary, or the agent of the Beneficiary, to initiate the Vacant/Foreclosed Residential Property Registration Process with the City.

1. **Street Address of the Property:**

2. **Los Angeles County Assessor Parcel Number for the Property:**

3.a. **Los Angeles County Recorded Notice of Default Date:**



CITY OF CARSON

COMMUNITY DEVELOPMENT DEPARTMENT FORECLOSURE MANAGEMENT UNIT

3.b. Los Angeles County Recorded Notice of Rescission Date (attach evidence):

Twenty-Four Hour Phone Contact Information:

If the City has any question regarding the Property or this Application who should the City contact by telephone?

Print name of Application contact individual

Print telephone number of Application contact individual

Email address

4. (A) **Name, Address and Phone/Email Contact for Beneficiary/Lender recording the Notice of Default:**

Name: _____

Address: _____

Phone Number: _____

Beneficiary Email Address: _____



CITY OF CARSON

COMMUNITY DEVELOPMENT DEPARTMENT FORECLOSURE MANAGEMENT UNIT

(B) Name, Address and Phone/Email Contact for Trustor (If known):

Name: _____

Address: _____

Phone Number: _____

Trustor Email Address: _____

(C) Name, Address and Phone/Email Contact for Renter/Occupant (If known):

Name: _____

Address: _____

Phone Number: _____

Renter/Occupant Email: _____

5. (A) Beneficiary Telephone Contact Information:

(B) Trustor Telephone Contact Information:

(C) Renter/Occupant Telephone Contact Information:

6. Foreclosed Property Mortgage Description:



CITY OF CARSON

COMMUNITY DEVELOPMENT DEPARTMENT FORECLOSURE MANAGEMENT UNIT

Beneficiary Loan Identification Number: _____

Date of Deed of Trust; and _____

Original Principal Amount of Mortgage \$ _____

7. **Date of Initial Default Inspection of the Property (SEE: CMC Section 8 Article V, Chapter 9 Section 5902(d) A):**

Date of the initial default inspection of the Property unknown at time of submission of the Application

8. **Date of Default Inspection Which Confirmed Property to Be Vacant or Abandoned/Date When Beneficiary Believes Property Became Vacant or Abandoned (SEE: CMC Section 8 Article V, Chapter 9 Section 5902(d) A):**

Date of such default inspection of the Property unknown at time of submission of Application

9. **Name, Address and Phone/Email Contact for Foreclosure Trustee:**

Name: _____

Phone Number: _____

Trustee Email Address: _____

10. **Name, Address and Phone/Email Contact For Property Management Service For Inspections (SEE: CMC Section 15-504(b)):**



CITY OF CARSON

COMMUNITY DEVELOPMENT DEPARTMENT FORECLOSURE MANAGEMENT UNIT

Name: _____

Address: _____

Phone Number: _____

Property Manager Email Address: _____

11. **Other Contact Person(s) (Specify Relationship to Beneficiary, Trustee, Property Manager or Real Estate Broker):**

Name: _____

Phone Number: _____

Other Contact Person(s) Email Address: _____

12. **At Time of Submission of Application, Has the Property Been Posted By Beneficiary as required by CMC Section 15-507(f)**

Yes

No

If "No", indicate estimated date by which the required Beneficiary contact notice will be placed on Property:

13. **Photographs of Front, Side-yards, and Rear (if available) of Property and indicate Date on Each Photograph**

Photos attached by Declarant



CITY OF CARSON

COMMUNITY DEVELOPMENT DEPARTMENT FORECLOSURE MANAGEMENT UNIT

- Photos to follow within seven (7) days of submission of the Application by Declarant

14. **Property Maintenance and Security Conditions**

The following paragraphs of this Part 14 of the Application (A)-(D), inclusive are conditions of the registration of the Property with the City under CMC Chapter 7. The Beneficiary is responsible for compliance with each of the following property maintenance conditions as set forth below:

- (A) CMC Section 6 Article V, Chapter 7 (Property Maintenance), Section 5702(v))
- (a) Properties which are abandoned or vacant shall be, in comparison to the neighborhood standard, maintained by the beneficiary and kept free of weeds, dry brush, dead vegetation, trash, junk, debris, building materials, any accumulation of newspapers, circulars, flyers notices, except those required by federal, state or local law, discarded personal items including but not limited to furniture, clothing, large and small appliances, printed material or any other items that give the appearance that the property is abandoned. The beneficiary shall maintain such property free of graffiti, tagging or similar markings by removal or painting over with an exterior grade paint that matches the color of the exterior of the structure. In general, the maintenance of abandoned or vacant property by the beneficiary shall comply with the standards set forth in Section 15-507 and HUD Mortgagee Letter 2007-03, dated January 25, 2007, or such other standard as may hereafter be ordered in writing addressed to the beneficiary by the Chief Building Official. Adherence to the maintenance and monitoring standard set forth in this section does not relieve the beneficiary/trustee or property owner of any obligations set forth in any covenants, conditions and restrictions and/or homeowners' association rules and regulations which may apply to the property.

[Special Note: the full text of HUD Mortgage Letter 2007-03, may be viewed by interested persons at www.hud.gov/offices/adm/hudclips/letters/mortgagee

- (b) Each Property which is acquired by a beneficiary following the recordation of a notice of default, whether acquired by such beneficiary by foreclosure, deed in lieu of foreclosure or judgment of foreclosure, shall be maintained by the



CITY OF CARSON

COMMUNITY DEVELOPMENT DEPARTMENT FORECLOSURE MANAGEMENT UNIT

beneficiary so as not to constitute a public nuisance under Chapter 7 of the Carson Municipal Code and other applicable laws, for so long a period of time as the beneficiary may own such property.”

(B) Does the Property have a Pool or Spa?

Yes

No

If “YES” describe pool maintenance arrangements to be undertaken by Beneficiary:

(C) At the time of submission of the Application to the City, the undersigned Declarant (See Part 16, below) on behalf of the Beneficiary, hereby certifies that there is no graffiti on any structure, fence, wall or sign on the Property.

By: _____

Print Name: _____

(D) The Community Development Department of the City may, for good cause, add additional property maintenance and security conditions to the Property upon written notice to the Beneficiary at any time after the date of submission of this Application to the City.

15. **Number of Dwelling Units on the Property:**

one dwelling unit

two dwelling units

three or more dwelling units



CITY OF CARSON

COMMUNITY DEVELOPMENT DEPARTMENT FORECLOSURE MANAGEMENT UNIT

16. **Name and Contact Information for Person (the “Declarant”) Submitting this Application to the City:**

Name: _____

Phone Number: _____

Email: _____

The undersigned hereby represents and warrants to the City of Carson that this Application is submitted to the City on behalf of _____ who is the:

Check each of the applicable boxes below:

Beneficiary (See Part 4)

Trustee in foreclosure (See Part 9)

Property Manager (See Part 10)

Other _____ (See Part 11)



CITY OF CARSON

COMMUNITY DEVELOPMENT DEPARTMENT FORECLOSURE MANAGEMENT UNIT

The undersigned Declarant on behalf of the Beneficiary, whose name, address and contact information appears in Part 4 of this Application, hereby authorizes, requests and gives consent to the City of Carson to conduct such regulatory inspections of the Property as set forth in CMC Chapter 7, from time-to-time as may be indicated.

The undersigned Declarant hereby declares under penalty of perjury that the facts set forth in this Application are true and correct to the best personal knowledge of the Declarant.

Date: _____

By: _____

Print Name of Declarant

Phone Number of Declarant

Email Address of Declarant

17. Fee Schedule

Registration per Property (per legal parcel)	<u>\$450.00</u>
TOTAL FEE	\$450.00

Additional costs for inspections or other specific City response costs relating to the Property in excess of the foreclosed property registration program requirements set forth in the City Fee Resolution and are the responsibility of the Beneficiary to pay the City, and shall be paid within thirty (30) days following the date of an invoice from the City. Said costs shall be (i) at the rate of \$60.00 per hour for such additional City services, rounded to the half hour for City employee time, plus 20% of such additional hourly cost, as City indirect overhead expense recovery; and (ii) for third party service costs (e.g., pool maintenance, property security, window replacement and the like) at the City's direct cost for the third party services if any, plus 20% for such third party cost as indirect City overhead expense recovery.



CITY OF CARSON

COMMUNITY DEVELOPMENT DEPARTMENT FORECLOSURE MANAGEMENT UNIT

18. ACCEPTANCE OF APPLICATION BY THE CITY OF CARSON

The undersigned hereby deems this Application to be complete, and accepts this Application for registration of the Property on behalf of the City of Carson.

Date: _____

By: _____

APPLICATION NOTES FOR CITY, BELOW:



CITY OF CARSON

**COMMUNITY DEVELOPMENT DEPARTMENT
FORECLOSURE MANAGEMENT UNIT**