Name, Address, Telephone No. & I.D. No.

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| **UNITED STATES BANKRUPTCY COURT**  SOUTHERN DISTRICT OF CALIFORNIA  325 West F Street, San Diego, California 92101-6991 | | |  |
| In Re | | | BANKRUPTCY NO. |
| Tax I.D. (EIN#): | /S.S.#: XXX-XX- | Debtor(s) |  |

# NOTICE OF HEARING AND DEBTOR’S MOTION TO VALUE REAL PROPERTY, TREAT CLAIM AS UNSECURED AND AVOID JUNIOR LIEN OF

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(Affected Lien Holder)

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| TO: |  |

**You are hereby notified** that on      , at      .m., in Department No.      , Room       of the Jacob Weinberger United States Courthouse, located at 325 West F Street, San Diego, California 92101-6991, there will be a hearing regarding the Debtor’s Motion to Value Real Property, Treat Claim as Unsecured and Avoid Junior Lien.

Any opposition or other response to this motion must be served upon the undersigned and the original and one copy of such papers with proof of service must be filed with the Clerk of the U.S. Bankruptcy Court at 325 West F Street, San Diego, California 92101-6991, **not later than twenty-eight (28)1 days from the date of service.**

# If a party served with this notice fails to timely file opposition to the motion, the court may deem such non-opposition to be consent by such party to the granting of the motion and the matter may be taken off calendar without further notice.

DATED:

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|  | [Attorney for] Debtor |

1 Depending on how you were served, you may have additional time for response. See FRBP 9006.

# CERTIFICATE OF SERVICE

I, the undersigned whose address appears below, certify:

That I am, and at all relevant times was, more than 18 years of age;

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| --- | --- | --- | --- | --- | --- | --- |
| That on |  | day of |  | , | 20  , | I served a true copy of the within NOTICE OF HEARING |
| AND DEBTOR’S MOTION TO VALUE REAL PROPERTY, TREAT CLAIM AS UNSECURED AND AVOID JUNIOR LIEN, D | | | | | | |
| together with the following pleadings as more fully set forth below on the following persons and/or a checked below. | | | | | | |
| (List all documents served) | | | | | | |
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1. **Service on Proof of Claim Address:** Include name and address of each person served and the method of service.

Affected Lien Holder filed a proof of claim assigned Claim No.      , and Affected Lien Holder was served at the following address designated for receipt of notices:

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As of the date of filing this Motion, Affected Lien Holder has *not* filed a proof of claim.

1. **Service in Compliance with FRBP 7004(b)(3):** Include name and address of each person served and the method of service.

Served on Affected Lien Holder in accordance with FRBP 7004(b)(3), as follows:

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1. **Additional Service Requirements in FRBP 7004(h):** Include name and address of each person served and the method of service.

The Affected Lien Holder is *not* an Insured Deposit Institution (as defined in the section 3 of the Federal Deposit Insurance Act and U.S.C. §101(35), so the additional service requirements in FRBP 7004(h) do not apply.

Served on Affected Lien Holder in accordance with the additional service requirements in FRBP 7004(h), as follows:

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1. **Service on Request for Special Notice Address:** Include name and address of each person served and the method of service.

Affected Lien Holder has filed a Request for Special Notice, and this address was served as follows:

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1. **Other.** List all other creditors and parties in interest that were served and the method of service.

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|  | For cases assigned to: | | |  |  |
|  | MICHAEL KOCH, TRUSTEE | | |  |  |
|  | 402 West Broadway, Suite 1450 | | |  |  |
|  | San Diego, CA 92101 | | |  |  |
|  | mkoch@ch13.sdcoxmail.com | | |  |  |
|  | | | | | |
|  | I certify under penalty of perjury that the foregoing is true and correct. | | | | |
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|  | | | | | |
|  | Executed on |  |  | |  |
|  | | (Date) |  | | (Typed Name and Signature) |
|  | | | | | |
|  | | | | |  |
|  | | | | | (Address) |
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|  | | | | |  |
|  | | | | | (City, State, ZIP Code) |