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   |  | | --- | |  | | Debtor(s) | | BANKRUPTCY NO. |

**NOTICE OF PRE-CONFIRMATION MODIFICATION DATED**

**TO CHAPTER 13 PLAN DATED**

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| TO: |

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|  | **You are hereby notified** that the Debtor(s) have contemporaneously filed a Pre-Confirmation Modification dated | | | |
|  | | (“PCM”) to the Chapter 13 Plan dated |  | with thisnotice. Because Debtor(s) |
| represent that the PCM will not adversely affect any party in interest, confirmation of the Chapter 13 Plan as so modified will | | | | |
| be considered at the following time: | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  | If no objection to the Chapter 13 Plan is currently pending, the PCM will be considered at the § 341(a) | | | | | | | | | | | | | |
|  |  | Meeting of Creditors set for | | | |  | , at |  | | | .m., at | |  | | |
|  |  |  | | | | | | | | , at which the sufficiency of the proposed | | | | | |
|  |  | modification will be considered. No further notice need be given. | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | |
|  |  | The hearing set for | | |  | | , at | |  | | | .m., in Department No. | |  | , |
|  |  | Room |  | , of the Jacob Weinberger United States Courthouse, on the objection(s) to confirmation | | | | | | | | | | | |
|  |  | already filed, located at 325 West F Street, San Diego, California 92101-6991 (“Court”). No further | | | | | | | | | | | | | |
|  |  | notice need be given. | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | |
|  |  | **IF A PARTY CONTENDS THAT THE CHAPTER 13 PLAN AS MODIFIED AFFECTS ITS INTERESTS,** | | | | | | | | | | | | | |
|  |  | **IT MUST FILE AN OPPOSITION AND REQUEST A HEARING FROM THE COURTROOM DEPUTY** | | | | | | | | | | | | | |
|  |  | **CLERK.** | | | | | | | | | | | | | |

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| DATED: |  |  |
|  | |  |
|  | | [Attorney for] Debtor |

**If modifying the Chapter 13 Plan after confirmation per § 1329, use Local Form CSD 1149.**

**If modifying the Chapter 13 Plan in a manner that might adversely affect a party in interest, use Local Form CSD 1170.**

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;

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | That on the |  | day of |  | , I served a true copy of the within NOTICE OF PRE- |
| CONFIRMATION MODIFICATION TO CHAPTER 13 PLAN on the following persons listed below by the mode of service | | | | | |
| shown below: | | | | | |

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| 1. | **To Be Served by the Court via Notice of Electronic Filing (“NEF”)**: | | | | | |
|  |  | | | | | |
|  | Under controlling Local Bankruptcy Rules(s) (“LBR”), the document(s) listed above will be served by the | | | | | |
| court via NEF and hyperlink to the document. On | | |  | | | , I checked the CM/ECF docket for |
| this bankruptcy case or adversary proceeding and determined that the following person(s) are on the Electronic Mail Notice List to receive NEF transmission at the e-mail address(es) indicated and/or as checked below: | | | | | | |
|  | | | | | | |
|  | | Attorney for Debtor: | | | | |
|  | |  | |  |  | |
|  | | For Chapter 13 cases: | |  |  | |
|  | | MICHAEL KOCH, TRUSTEE  mkoch@ch13.sdcoxmail.com | |  |  | |

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| 2. | **Served by United States Mail**: | | | | |
|  |  | | | | |
|  | On |  | , I served the following person(s) and/or entity(ies) at the last known address(es) | | |
| address(es) in this bankruptcy case by placing accurate copies in a sealed envelope in the United States Mail via 1) first class, postage prepaid or 2) certified mail with receipt number, addressed as follows: | | | | | |
|  | Attorney for Debtor: | | |  | Debtor: |
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| 3. | **Served by Personal Delivery, Facsimile Transmission, Overnight Delivery, or Electronic Mail**: | | | | |
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|  | | | | | |
|  | Under Fed.R.Civ.P.5 and controlling LBR, on |  | | | , I served the following parties |
| by personal delivery, or (for those who consented in writing to such service method), by facsimile transmission, by overnight delivery and/or electronic mail as follows: | | | | | |
|  |  | | | | |
|  | Attorney for Debtor: | |  | Debtor: | |
|  | | | | | |
|  | I declare under penalty of perjury under the laws of the United States of America that the statements made in this proof of service are true and correct. | | | | |
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| Executed on |  |  |  |
|  | (Date) |  | (Typed Name and Signature) |
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|  | | |  |
|  | | | (Address) |
|  | | | |
|  | | |  |
|  | | | (City, State, ZIP Code) |