

Your Company Name

Company Address

City, state, Zip

Phone: (555) 555-5555 Fax: (444) 444-4444

Date:

To: Institution Name
Attn: Loss Mitigation Rep. Name
Phone: (agency Phone)
Fax: (agency Fax)

RE: **Short Sale Request**
Acct.# xxxxxxxxxx
Property Address 123 Main St;

Dear Mr. / Ms

Pursuant to our conversation on _____ (Date) this a request for a postponement on the sale date of the property located at _____ (Property Address). We will be in a position to fund the purchase and closing by _____. We also request a short sale in the "Net" amount of \$ _____ (net to lender) to your institution.

We are prepared to send \$ _____ Certified funds prior to the sale date on _____ (date of sale) as good faith money to be applied against the short sale offer of _____ (NET to bank) at closing.

Should the short sale not be approved we request the \$ _____ (good faith amount) be applied towards arrearages with the remaining arrearage balance to be worked out over the course of the next 12 months

The short sale offer reflects various deficiencies with the properties condition not limited to but including:

(Insert repairs)

We accept this purchase "As Is" and will handle all repairs. Please find the following enclosed:
(Short sale financial package)

Please let me know how quick you can get this one approved. Look forward to working together on this property.

Regards,

