

# NOTICE OF INTENT TO FILE FORECLOSURE ACTION

## CERTIFIED MAIL, RETURN RECEIPT REQUESTED

1) Name of Party Filing Action: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City / State / Zip: \_\_\_\_\_

2) Mailing Date: \_\_\_\_\_

3) Name of Property Owner: \_\_\_\_\_  
**AND Mohave County Treasurer (must be a named defendant per ARS § 42-18201)**  
OR other interested Party: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City / State / Zip: \_\_\_\_\_

4) Property Street Address: \_\_\_\_\_  
City / State / Zip: \_\_\_\_\_

5) Tax Bill Mailing Address: \_\_\_\_\_  
City / State / Zip: \_\_\_\_\_

6). Mohave County Treasurer  
700 W. Beale Street  
Kingman, AZ 86401

To Whom It May Concern:

I own a tax lien on the real property identified below. I plan to file a court action to foreclose the right to redeem the lien.

Real Property Tax Parcel Identification Number: \_\_\_\_\_

Legal Description of the Real Property: \_\_\_\_\_

\_\_\_\_\_

Certificate of Purchase Number: \_\_\_\_\_

I plan to file for foreclosure on or after: \_\_\_\_\_

If you wish to redeem the tax lien, please contact the Mohave County Treasurer at 928-753-0737 or 800-420-6352.

7) Signature: \_\_\_\_\_