STATE OF ILLINOIS, CIRCUIT COURT _____ **COUNTY**	**MOTION TO STAY FORECLOSURE SALE**	_For Court Use Only_

Instructions ▼

Directly above, enter the name of the county where the case was filed.

Enter the name of the bank or mortgage company as Plaintiff.

Enter your names as Defendants.

Enter the Case Number from the Complaint you received.

Plaintiff _(Name of Bank or Mortgage Company)_

v.

Defendants

Case Number

Enter your full names as Defendants. You will be called "Defendants" on the rest of this form even if there is only one person using this form.

You can file this Motion by yourself or with any other Defendants listed in the Complaint you received.

In **A1**, enter the complete address of the property involved in this foreclosure case.

In **A2**, check "Yes" if you have a mortgage loan for the property involved in this foreclosure case.

In **A3**, check "Yes" if you live in the property involved in this foreclosure case.

In **A4**, check "Yes" if the property involved in this foreclosure case is a single family home or has 1 to 4 separate units where people live.

In **A5**, check "Yes" if you went to court and saw a judge about the property involved in this foreclosure case.

Defendants: _____
Your Names

A. Defendants are providing the following information:

1. The address of the property involved in this foreclosure case:

   _____
   Street Address, Apt #

   _____
   City   _State_   _ZIP_

2. Defendants are the borrowers of a mortgage loan on the property involved in this foreclosure case:

   ☐ Yes   ☐ No

3. Defendants live in the property involved in this foreclosure case and it is their main home:

   ☐ Yes   ☐ No

4. The property involved in this foreclosure case is a single family home or has 1 to 4 residential units:

   ☐ Yes   ☐ No

5. Defendants have already been in front of a judge about this foreclosure case:

   ☐ Yes   ☐ No

In **A6**, check "Yes" if you went to court before and gotten a foreclosure stay in this case. If you check yes, attach all related orders.

In **A7**, enter the date the judge signed the Judgment of Foreclosure and Sale you received.

In **A8**, enter the date the property is going to be sold.

In **B1**, check "Yes" in the first part if you have applied to get your mortgage loan changed so that you can keep the property. In the second part, check the box about whether the modification is under the HAMP program.

In **B2**, check "Yes" if you have a contract to sell the property as a short sale.

In **B3**, check "Yes" if you need more time to explore your options or seek advice.

In **B4**, enter any other reason you are asking to delay the foreclosure sale.

6. Defendants already have a foreclosure stay in this case:
   ☐ Yes   ☐ No
   Defendants have attached all prior foreclosure stay orders.

7. The judge signed the order for a Judgment of Foreclosure and Sale on:

   _____
   Date

8. A foreclosure sale of the property is scheduled for: _____
   Date

B. Defendants are asking to delay the foreclosure sale because:

1. Defendants have a loan modification application pending:
   ☐ Yes   ☐ No   ☐ Do Not Know
   It is a HAMP loan modification?:
   ☐ Yes   ☐ No   ☐ Do Not Know
   Under the terms of the modification, the lender is not permitted to go forward with the sale at this time (attach a copy of the modification contract to this *Motion*).
   ☐ Yes   ☐ No   ☐ Do Not Know

2. Defendants have a sale contract for the property being sold as a result of a foreclosure (attach a copy of the sale contract to this *Motion*):
   ☐ Yes   ☐ No   ☐ Do Not Know

3. Defendants need additional time to explore their options or seek advice.
   ☐ Yes   ☐ No   ☐ Do Not Know

4. Other: _____

   _____

C. Defendants ask the Court to:

1. Delay the foreclosure sale of the property being sold as a result of a judgment of foreclosure and sale; AND

2. Award other such relief as the Court deems just and equitable.

Under the Code of Civil Procedure, [735 ILCS 5/1-109](#), making a statement on this form that you know to be false is perjury, a Class 3 Felony.

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign and print your name.

After you finish this form, each Defendant on the form must sign and print their name, current addresses and phone number.

Defendants certify that everything in the *Motion to Stay Foreclosure Sale* is true and correct. Defendants understand that making a false statement on this form is perjury and has penalties provided by law under [735 ILCS 5/1-109](#).

/s/
_____   _____
Defendant Signature   *Defendant Printed Name*

_____
Street Address, Apt #

_____   _____ _____ _____
City   *State*   *ZIP*   *Phone*

_____   _____
Defendant Signature   *Defendant Printed Name*

_____
Street Address, Apt #

_____   _____ _____ _____
City   *State*   *ZIP*   *Phone*

_____   _____
Defendant Signature   *Defendant Printed Name*

Street Address, Apt #

City   *State*   *ZIP*   *Phone*

☐ Defendants have attached the *Additional Defendant Signatures, Names, & Addresses* Form

> Check if you need more room and fill out and file the *Additional Defendant Signatures, Names, & Addresses* form with this form.

PROOF OF DELIVERY

1.   I sent this document:

> In **1a**, enter the name, mailing address, and email address of the party or lawyer to whom you sent the document.

    a.   To:
        Name: _____
                First   *Middle*   *Last*
        Address: _____
                Street, Apt #   *City*   *State*   *ZIP*
        Email address: _____

> In **1b**, check the box to show how you sent the document, and fill in any other information required on the blank lines.

> **CAUTION:** If the other party does not have a lawyer, you may send the document by email only if the other party has listed their email address on a court document.

    b.   By: ☐ Personal hand delivery
             ☐ Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

             Address of Post Office or Mailbox
             ☐ Third-party commercial carrier, with delivery paid for at:

             Name (for example, FedEx or UPS) and office address
             ☐ The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)
             ☐ Email *(not through an EFM or EFSP)*
             ☐ Mail from a prison or jail at:

             Name of prison or jail

> In **c**, fill in the date and time that you sent the document.

    c.   On: _____
           Date
        At: _____   ☐ a.m.   ☐ p.m.
           Time

> In **2**, if you sent the document to more than 1 party or lawyer, fill in **a**, **b**, and **c**. Otherwise leave **2** blank.

2.   I sent this document:

    a.   To:
        Name: _____
                 First   *Middle*   *Last*
        Address: _____
                Street, Apt #   *City*   *State*   *ZIP*
        Email address: _____

    b.   By: ☐ Personal hand delivery
             ☐ Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

             Address of Post Office or Mailbox
              ☐ Third-party commercial carrier, with delivery paid for at:

              Name (for example, FedEx or UPS) and office address
             ☐ The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)

☐ Email *(not through an EFM or EFSP)*

☐ Mail from a prison or jail at:

_____
Name of prison or jail

c. On: _____
   Date

   At: _____ ☐ a.m. ☐ p.m.
      Time

> In **3**, if you sent the document to more than 2 parties or lawyers, fill in **a**, **b**, and **c**. Otherwise leave **3** blank.

3. I sent this document:

   a. To:
   Name: _____
         First   *Middle*   *Last*
   Address: _____
         Street, Apt #   *City*   *State*   *ZIP*
   Email address: _____

   b. By: ☐ Personal hand delivery

      ☐ Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

      _____
      Address of Post Office or Mailbox

      ☐ Third-party commercial carrier, with delivery paid for at:

      _____
      Name (for example, FedEx or UPS) and office address

      ☐ The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)

      ☐ Email *(not through an EFM or EFSP)*

      ☐ Mail from a prison or jail at:

      _____
      Name of prison or jail

   c. On: _____
      Date

      At: _____ ☐ a.m. ☐ p.m.
         Time

> If you sent your document to more than 3 parties or lawyers, check the box and file the *Additional Proof of Delivery* form with this *Motion*.

☐ I have completed an *Additional Proof of Delivery* form.

I certify that everything in the Proof of Delivery is true and correct. I understand that making a false statement on this form is perjury and has penalties provided by law under 735 ILCS 5/1-109.

> Under the Code of Civil Procedure, 735 ILCS 5/1-109, making a statement on this form that you know to be false is perjury, a Class 3 Felony.

/s/
_____   _____
Your Signature   *Street Address*

> If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign and print your name.

_____   _____
Print Your Name   *City, State, ZIP*

_____
Telephone