

SYLVIA FORD BROWN  
CHAPTER 13 TRUSTEE  
REQUEST FOR AUTHORIZATION TO  
ENTER INTO POST BANKRUPTCY DEBT  
  
RENTER'S LETTER

DEBTOR'S NAME \_\_\_\_\_

DEBTOR'S PHONE NUMBER \_\_\_\_\_

DEBTOR'S CASE NUMBER/SSN \_\_\_\_\_

LESSOR \_\_\_\_\_

MONTHLY RENTAL AMOUNT \_\_\_\_\_

TYPE OF ACCOMODATION (ex: 2 bedroom apt, 4 bedroom townhome, etc) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

AUTHORIZED AGENT'S NAME \_\_\_\_\_

AUTHORIZED AGENT'S TITLE \_\_\_\_\_

AUTHORIZED AGENT'S PHONE NUMBER \_\_\_\_\_

*In addition to this form please submit a copy of your current lease or rent receipt, indicating the current amount of rent being paid.*