|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Fill in this information to identify your case** | | | | | |
| **UNITED STATES BANKRUPTCY COURT DISTRICT OF COLORADO** | | | | | |
| Debtor 1: |  |  |  | Case #: |  |
|  | First Name | Middle Name | Last Name |  | 13 |
| Debtor 2: |  |  |  | Chapter: |
|  | First Name | Middle Name | Last Name |  |  |

**Local Bankruptcy Form** **3015-1.2**

**Notice of Filing of Chapter 13 Plan, Deadline for Filing Objections Thereto,**

**and Hearing on Confirmation**

**Complete applicable sections.**

|  |  |
| --- | --- |
| Part 1 | **Objection Deadline** |

Objection deadline: **[month/day/year]**

|  |  |
| --- | --- |
| Part 2 | **Notice** |

NOTICE IS HEREBY GIVEN that the debtor filed a Chapter 13 Plan on **[month/day/year]**. A copy of the Chapter 13 Plan is attached. A confirmation hearing on the debtor’s plan has been set for **[month/day/year]** at **[time]** at the U.S. Bankruptcy Court, U.S. Custom House, 721 19th Street, Courtroom **[letter]**, Fifth Floor, Denver, Colorado 80202.

The last day to file an Objection to the Plan is the objection deadline stated above. Objections to the Chapter 13 Plan must comply with L.B.R. 3015-1(c) and must clearly specify the grounds upon which they are based, including the citation of supporting legal authority, if any. General objections will not be considered by the Court.

Unless a written objection is filed, the Chapter 13 Plan may be confirmed without a hearing, upon the debtor’s filing of L.B.F. 3015-1.3, Verification of Confirmable Plan pursuant to L.B.R. 3015-1.

This Notice pertains only to the Chapter 13 Plan. Creditors should also review the Notice of Chapter 13 Bankruptcy Case for additional information and deadlines, including those related to objecting to dischargeability of certain debts, objecting to exemptions, and filing a proof of claim.

|  |  |
| --- | --- |
| Part 3 | **Signature of Debtor’s Attorney or Debtor (if unrepresented)** |

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Bar Number (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Facsimile number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_