

Request for Approval of u.s. Department of Housing and OMB No. 2502-0018

Advance of Escrow Funds Urban Development (Exp. 11/30/2009)

Office of Housing
Federal Housing Commissioner

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected on this form is utilized to control the disposition of escrow funds for offsite facilities, construction changes, and unpaid construction costs and repairs pending completion or not paid at final endorsement. This collection of information is authorized by 24 CFR section 200.50. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number. Provision of this information is required to obtain benefits.

Request for Approval of Advance Payment of Escrow Funds Completed by the depository. Then submitted to HUD in triplicate.

Project Name	Project Number	Request for Approval of Advance of Escrow Funds Section 232	U.S. Department of Housing and Urban Development Office of Healthcare Programs	OMB Approval No. 9999-9999 (exp. mm/dd/yyyy)
--------------	----------------	--	---	---

- Deleted Cells
- Deleted Cells
- Deleted Cells
- Inserted Cells
- Inserted Cells

Name of Mortgagor	Date of Escrow Agreement (mm/dd/yyyy)
Payment Amount Requested	Escrow Account Balance after this payment
The Payment Requested is for offsite facilities; construction changes; construction costs not paid at final endorsement noncritical repair capital needs assessment	The Remaining Balance is for offsite facilities; construction changes; construction costs not paid at final endorsement noncritical repair capital needs assessment

The undersigned received the Request for Payment (see page 2) from the above named sponsor/mortgagor. To the best of our knowledge, information, and belief, the sum requested is now payable. We intend to disburse that sum on or about (date mm/dd/yyyy) upon your approval.

Public reporting burden for this collection of information is estimated to average 1 hours. This includes the time for collecting, reviewing, and reporting the data. The information is being collected to obtain the supportive documentation which must be submitted to HUD for approval, and is necessary to ensure that viable projects are developed and maintained. The Department will use this information to determine if properties meet HUD requirements with respect to development, operation and/or asset management, as well as ensuring the continued marketability of the properties. Response to this request for information is required in order to receive the benefits to be derived. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number. No confidentiality is assured.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Request for Approval of Advance/Release of Escrow Funds: Completed by the depository institution. Submit to HUD in triplicate. The definition of any capitalized term or word used herein can be found in this Request for Approval of Advance of Escrow Funds, the Regulatory Agreement between Borrower and HUD, the Note, and/or the Security Instrument.

Project Name of the Depository	Name & Signature of Authorized Official/Borrower/Owner	Date (mm/dd/yyyy) of Escrow Agreement
Project Number	Escrow Amount without Contingency: \$	Contingency Amount: \$
Payment Amount Requested: \$	Escrow Account Balance after this payment: \$	Advance Number:

Formatted Table

Note: Original and two copies must be signed.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Approval _____
The Payment Requested is for:
 Offsite facilities
 Construction changes

- Non-critical repair
- Minor movables
- Construction costs not paid at final endorsement
- Release of ~~Advance~~ Initial Operating Deficit
- Release of Latent Defect Escrow Funds Completed by _____
- _____ (Other)
- _____ (Other)

The undersigned received the Department of Housing and Urban Development Request for Payment (see pages 2-3) from the above-named Borrower. To the best of our knowledge, information, and belief, the sum requested is now payable. We intend to disburse that sum on or about (date): _____ upon your approval.

Name & Address of Depository

- Disbursement of funds is approved from the Escrow Deposit for
- offsite facilities,
 - construction changes,
 - construction costs not paid at final endorsement.
 - noncritical repair
 - capital needs assessment

Payment Approved
\$

Approval Recommended

Name of Mortgage Credit Examiner

signature of Mortgage Credit Examiner

date (mm/dd/yyyy)

Authorizing Agent for the Department of Housing and Urban Development

Name of the Depository Institution:

Authorizing Official Name & Phone Number:

Authorizing Official Signature:

signature — date
Date (mm/dd/yyyy)

Submitting Official Name & Phone Number:

Submitting Official Signature:

Date (mm/dd/yyyy)

- Split Cells
- Formatted Table
- Inserted Cells
- Split Cells

~~**Request for Payment** To be completed by the mortgagor/borrower. To be submitted to the depository in triplicate.
Note: Original and two (2) copies must be signed.~~



Approval of Advance of Escrow Funds: Completed by HUD.

<p>Disbursement of funds is approved from the Escrow Deposit for: _____</p> <p><input type="checkbox"/> Offsite facilities</p> <p><input type="checkbox"/> Construction changes</p> <p><input type="checkbox"/> Non-critical repair</p> <p><input type="checkbox"/> Minor movables</p> <p><input type="checkbox"/> Construction costs not paid at final endorsement</p> <p><input type="checkbox"/> Release of Initial Operating Deficit</p> <p><input type="checkbox"/> Release of Latent Defect Escrow</p> <p><input type="checkbox"/> _____ (Other)</p> <p><input type="checkbox"/> _____ (Other)</p>		
<p>Payment Approved: \$ _____ Disapproved: \$ _____</p>		
<p>Comments/Notes</p> 		
<p>Approval Recommended:</p> <p>Name _____</p> <p><small>Name & Address of Depository</small> _____</p> <p><small>Requested Amount</small> _____</p> <p><small>\$</small> _____</p>	<p>Signature of Housing Account Executive</p> <p>_____</p> <p style="text-align: center;">X</p>	<p>Date (mm/dd/yyyy)</p> <p>_____</p>
<p>Name of Authorized Agent for HUD</p> <p>_____</p>	<p>Signature of Authorized Agent for HUD</p> <p>_____</p> <p style="text-align: center;">X</p>	<p>Date (mm/dd/yyyy)</p> <p>_____</p>

Formatted Table
 Inserted Cells
 Inserted Cells

The undersigned mortgagor/borrower hereby requests a payment of funds covering advances provided for by the Escrow Agreement for:

offsite facilities heretofore executed on the _____ day of _____, _____, as indicated in the following statement with respect to all items of construction listed in schedule "A" attached to the Agreement;

the net amount due for work performed up to the _____ day of _____, _____, act

construction costs not paid at final endorsement and listed in Schedule "A" attached to the Agreement;

construction change(s) as identified by request number(s): _____

noncritical repairs under Section 223(f), _____ Section 223(a)(7), and _____ Preservation Capital Needs Assessment under Section _____

|
|

Architect's Signature	Firm Commitment Exhibit A Repair List, or Construction Change Request Number or Item	A. Estimated Cost as stated in an Escrow Agreement or Form HUD- 92437 or Firm Exhibit B Date (mm/dd/yyyy)	B. Requested Funds for work completed for this advance only.	C. Cumulative/ Total of all work completed to date for each line item.	D. HUD Approved Amount
	1.	\$	\$	\$	\$
	2.	\$	\$	\$	\$
	3.	\$	\$	\$	\$
	4.	\$	\$	\$	\$
	5.	\$	\$	\$	\$
	6.	\$	\$	\$	\$
	7.	\$	\$	\$	\$
	8.	\$	\$	\$	\$
	9.	\$	\$	\$	\$
	10.	\$	\$	\$	\$
	11.	\$	\$	\$	\$
	12.	\$	\$	\$	\$
	13.	\$	\$	\$	\$
	Latent Defect*	\$	\$	\$	\$
	Contingency	\$	\$	\$	\$
	Total	\$	\$	\$	\$
	Less Retained % (Holdback) **	\$	\$	\$	\$
	Balance: Total Amount due to date	\$	\$	\$	\$
	Less previous payments	\$	\$	\$	\$
	Net amount due on this requisition	\$	\$	\$	\$

- Inserted Cells
- Inserted Cells
- Formatted Table
- Inserted Cells

Inspector's Offsite *To be completed during final submission and close out of Escrow Account, if applicable
 **20% for 223(f)s and 10% for 223a(7)s or reference project's Escrow Agreement

The undersigned Borrower hereby requests a payment of funds covering advances provided by the Escrow Agreement, heretofore executed on the _____ day of _____, 20____, for:

offsite facilities as indicated by the net amount due for work performed up to the _____ day of _____, 20____, according to the following statement with respect to all items of construction listed in Exhibit "A" attached to the Agreement:

construction costs not paid at final endorsement and listed in Exhibit "A" attached to the Escrow Agreement for Incomplete Construction Change Certification;

~~I certify that to the best of my knowledge, information and belief the aforementioned work has been acceptably completed.~~

construction change(s) as identified by request number(s): _____;

non-critical repairs pursuant to Section 223(f), Section 223(a)(7), or (other) _____.

Initial Operating Deficit 223(f) _____ 223(a)(7) _____

Latent Defect Escrow 223(f) _____ 223(a)(7) _____

Each signatory below hereby certifies that each of their statements and representations contained in this instrument and all their supporting documentation thereto are true, accurate, and complete. This instrument has been made, presented, and delivered for the purpose of influencing an official action of HUD in insuring the Loan, and may be relied upon by HUD as a true statement of the facts contained therein.

Name of Entity: _____

By: _____ Signature: _____

Printed Name, Title: _____

_____ Dated: _____

_____ By: _____ Signature: _____

Printed Name, Title: _____

_____ Dated: _____

[ADD ADDITIONAL LINES IF MORE THAN TWO SIGNATORIES]

Warning:

Any person who knowingly presents a false, fictitious, or fraudulent statement or claim in a matter within the jurisdiction of the U.S. Department of Housing and Urban Development is subject to criminal penalties, civil liability, and administrative sanctions.

Inspector's Signature Offsite and Construction Change Certification:

The undersigned hereby certifies that *(mark the appropriate box)*

the total cost has been paid in full and in cash from funds other than Loan proceeds;

upon release of the amount deposited for this offsite item or construction change, payment in full shall be made to the contractor prior to the next request for an insured advance or Loan disbursement and a receipt of payment from the general contractor shall be submitted with the next request for an insured advance or Loan disbursement.

The undersigned further certifies that all work, labor and materials to be paid under this Request are satisfactory and in accordance with the contract documents.

Formatted Table
Deleted Cells

Name of Borrower:	Signature of Authorized Borrower Official	Date (mm/dd/yyyy)
	X	

Inserted Cells

Architect's Offsite and Construction Change Certification:

I certify, based on my on-site observations (or those of my authorized representative), that to the best of my knowledge, information and belief, the Work covered by the aforementioned has been completed.

Architect's Signature/Date:

X

Inspector's Offsite and Construction Change Certification:

I certify that to the best of my knowledge, information and belief, the aforementioned work has been acceptably completed.

Inspector's Signature/Date:

X

Warning:

Any person who knowingly presents a false, fictitious, or fraudulent statement or claim in a matter within the jurisdiction of the U.S. Department of Housing and Urban Development is subject to criminal penalties, civil liability, and administrative sanctions.