HUD Survey Instructions and Surveyor's Report Section 242

U.S. Department of Housing and Urban Development Office of Hospital Facilities

OMB Approval No. 2502-0602 (Exp. XX/XX/XXXX)

Public Reporting Burden for this collection of information is estimated to average 0.5 hour 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, DC 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (2502-0468), Washington, DC 20503. Do not send this completed form to either of the above addresses.

WARNING: Federal law provides that anyone who knowingly or willfully submits (or causes to submit) a document containing any false, fictitious, misleading, or fraudulent statement/certification or entry may be criminally prosecuted and may incur civil administrative liability. Penalties upon conviction can include a fine and imprisonment, as provided pursuant to applicable law, which includes, but is not limited to, 18 U.S.C. 1001, 1010, 1012; 13 U.S.C. 3729, 3802, 24 C.F.R. Parts 25, 28 and 30, and 2 C.F.R. Parts 180 and 2424.

This survey is to be used in a hospital loan transaction submitted to HUD.

Its uses will include:	Special Project Features:		
[] Land title recordation (all cases)	[] Condominium/Air rights, and/or		
[] Site grading plan preparation (item 1 below)[] Plot plan design/redesign (item 2 below)	[] Other: (specify)		

Standards of Performance: In every instance the survey and map(s) and/or plat(s) must be made in accordance with the requirements for an "ALTA/ACSM Land Title Survey" and in compliance with the:

- 2016 Minimum Standard Detail Requirements for ALTA/NSPS Land Title Surveys, jointly established and adapted by the American Land Title Association and the National Society of Professional Surveyors;
- Table A, Optional Survey Responsibilities and Specifications, thereof, items 1, 2, 3, 4, 6a, 6b, 7a, 8, 9, 10a, 10b, 11b, 12, 13, 16, 17, 18, and 19;
- And the following requirements as applicable:
- 1. **Site Grading Involved**: Comply with table A, item 5. Contours may not exceed 1-foot vertical intervals, except that 2-foot and 5-foot vertical intervals may be used where the mean site gradient exceeds 5 percent and 10 percent respectively. Where curbs and/ or gutters exist, show top of curb and flow line elevations.
- 2. **Plot Plan Design/Redesign Involved**: Comply with Table A, Item 6.
- Condominium/Air-rights Involved: The surveyor must provide a survey made in accordance with any Property Jurisdiction requirements or, in the absence of such requirements, professionally recognized standards.
- 4. **Flood Hazard Involved:** Where any portion of the site is subject to flood hazard, show the 100-year return frequency flood hazard elevation and flood zone for all projects plus the 500-year return frequency flood hazard elevation and flood zone for Section 811 housing program. For existing projects show the site elevation at the building entrances, lowest habitable finished floor, and basement for each primary building, and the vehicular parking area that serves each primary building. Take return frequency flood hazard elevations from the applicable Federal Flood Insurance Rate Map. Where such is not available, take the elevations from available state or local equivalent data, or when not available, work in conjunction with

owner's engineer.

5. **Blanket Easement Involved**. Show on the map/plat the location of any facility that is located within or traverses the property under provisions of a blanket easement.

Additional Owner Requirements: The following requirements are not intended to void any other part of this instruction.

Owner's Representative / Contact:		
Name:		
Address:		
Phone No:		
Certification : The survey map/plat must bear the ALTA/NSPS Certification:		
"To (name of insured, if known), (name of lender, if known), (name of title insurer, if known), Department of Housing and Urban Development ("HUD"), (names of others as negotiated with the client):		
This is to certify that this map or plat and the survey on which it is based were made in accordance with the 2016 Minimum Standard Detail Requirements for ALTA/ACSM Land Title Surveys, jointly established and adopted by ALTA and NSPS, and includes Items of Table A thereof. The field work was completed on[date].		
Date of Plat or Map: (Surveyor's signature, printed name and seal with Registration/License Number)		

closing. Identify pertinent observed and otherwise known conditions on the Surveyor's Report. I certify that, on (date) , I made a survey of the premises standing in the name of situated in (city, county, state): known as street numbers and shown on the accompanying survey entitled: I made a careful inspection of said premises and of the buildings located thereon at the time of making such survey, and again, on (date) ______, and on such latter inspection, I found said premises to be standing in the name of: _____ In my professional opinion, the following information reflects the conditions observed on the date of the last site inspection or disclosed in the process of researching title to the premises, and I further certify that such conditions(s) are shown on the survey map/plat dated ______ or has/have been updated thereon under Revision Date ______. (For Items 1 through 10, please provide a detailed answer or state "none," if inapplicable.) 1. Rights of way, old highways or abandoned roads, lanes or driveways, drains, sewer or water pipes over and across said premises: 2. Springs, streams, rivers, ponds or lakes located, bordering on or running through said premises: 3. Cemeteries or family burying grounds located on said premises: 4. Electricity, or electromagnetic/communications signal, towers, antenna, lines, or line supports located on, overhanging or crossing said premises Disputed boundaries or encroachments. (If the buildings, projections or cornices thereof or signs affixed thereto, fences or other indications of occupancy encroach upon adjoining properties or the like encroach upon surveyed premises, specify all such):

Surveyor's Report: A current Surveyor's Report (not more than 120 days old) must be included with the survey map(s)/plat(s) submitted to HUD for project design review, construction contract document sets, as required during construction, upon project completion; and with the map(s)/plat(s) used at initial and final

6.	Earth moving work, building construction, or building additions within recent months:	
7.	Building or possession lines. (In case of city or town property specify not walls are independent walls or party walls and as to all easements. Rights." In case of country property report specifically how boundary is, whether by fences or otherwise):	s of support or "Beam
8.	Recent street or sidewalk construction and/or any change in street line proposed by and available from the controlling jurisdiction:	es either completed or
9.	Flood hazard:	
	. Site used as a solid waste dump, sump, or sanitary landfill:	
	er, I hereby certify to HUD, (Borrower), (Sponsor), (Lender), (Title Inst r successors and assigns, that:	urance Underwriter), (Other), and
	I made an on the ground survey per record description of the land sho, dated ("Survey"), loc county, township, etc.), and that it was made in accordance with this H and Surveyor's Report, and the requirements for an ALTA/NSPS Lan in the 2016 Minimum Standard Detail Requirements for ALTA/NSPS	rated in <i>(city or town</i> , HUD Survey Instructions d Title Survey, as defined
	To the best of my knowledge, belief and information, except as shown no encroachments across any property lines; title lines and lines of across ame; and the premises are [not subject to a] [subject to a] 100/500 y hazard, and such condition is shown on the Federal Flood Insurance Federal No (please add "none," if inapplicable).	tual possession are the ear return frequency flood
urveyor	's Name:	License Number: