

OMB Approval No. 2503-0033 (Exp. 00/00/0000)

Public reporting burden for this collection of information is estimated to average 8 minutes 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. Ginnie Mae may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

The information is required by Sec. 306(g) of the National Housing Act or by Ginnie Mae Handbook 5500.3, Rev. 1. The purpose of this information is to report to Ginnie Mae a summary of information on an issuer's outstanding pools or loan packages, to provide a certification as to the accuracy of the information reported, and to provide a format for RPB reporting. The information collected will not be disclosed outside the Department except as required by law.

## **APPENDIX VI-21 FORM HUD 11710-DH HMBS ISSUER'S MONTHLY SUMMARY REPORT**

- Applicability:** Ginnie Mae II HMBS Program.
- Purpose:** To report to Ginnie Mae a summary of information on an Issuer's outstanding HMBS pools and Participations and to provide a certification as to the accuracy of the information reported.
- Prepared by:** Issuer
- Prepared in:** The information on this form HUD 11710-DH, and any correction to the information, must be electronically submitted in all cases by preparing a PDF of the executed form and submitting the PDF as an e-mail attachment to the following address: GinnieMaeHMBS@Deloitte.com
- Distribution:** For Ginnie Mae II HMBS pools
- Under Ginnie Mae II, guaranty fees will be collected from each Issuer by use of an automated clearing house (ACH) debit.
- Due Date:** To be submitted as early as the second business day of the month following the reporting month but no later than 7:00 pm (Eastern Time) on the fourth business day of the month following the reporting month.

### **Preparation Instructions**

The form HUD 11710-DH relating to the Issuer's Ginnie Mae II HMBS pools must include just the Ginnie Mae II HMBS pools. In the heading of the form enter the Issuer's name, address and zip code, the Submission Type (original or revised), the number of pools being reported, the reporting cutoff date, the reporting month, the Issuer ID number and the Issuer RPB report ID number. Also, check the box to indicate that the pools being reported are under the Ginnie Mae II program.

### **Section (1) – Total Number of Loans**

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Enter the total current number of HECM loans in the Issuer's HMBS pools for the reporting period. Include any HECM loans that have been liquidated during the reporting period.

### **Section (2) - Total Escrow Funds**

Enter the total amount of the entries as reported in the Pool/Security Accounting Records' "Escrow Fund Balance" (Field 26) as defined in Appendix VI-17 HMBS Issuer Pooling and Reporting Specification for the reporting period.

### **Sections (3) – Total Principal & Interest Funds**

Enter the total amount of the entries as reported in the Pool/Security Accounting Records' "P&I Fund Balance" (Field 23) as defined in Appendix VI-17 HMBS Issuer Pooling and Reporting Specification for the reporting period.

### **Sections (4) through (7)**

Enter in each Section named below the prescribed total for all outstanding pools

**Section (4):** Enter the total amount of the Guaranty Fee as reported by the Issuer for pools as applicable for the reporting period.

**Section (5):** Enter the total number of -Participations with a positive, non-zero balance at the end of the reporting month. Do not include any participations or HECMs that have been liquidated.

**Section (6):** Enter the total amount of monthly pool UPB balance as reported in the Pool/Security Accounting Records' "Pool Ending UPB" (Field 9) for the reporting period.

**Section (7):** Enter the total amount of the monthly Securities RPB as reported in the Pool/Security Accounting Records' "Security Ending RPB" (Field 18) for the reporting period.

**Section (8):** Enter the total amount of payments due to security holders as reported in the Pool/Security Accounting Records' Security Payments This Period (Field 12) for the reporting period.

**ACH Account:** Enter the bank name and address and the account number of the central P&I custodial account.

**Signature:** The report must be certified by an authorized officer of the Issuer whose name appears on form HUD 11702. The signature constitutes a certification of the truth and accuracy of Appendix VI-17 HMBS Issuer Pooling and Reporting Specification

All other information including printed Name, Title and Telephone number must be provided.