

MF Request New FHA Number

Signed in as

Request New FHA Number

Instructional text. Aenean finibus cursus lorem, tempus dictum arcu. Sed vel eros eu dui congue fermentum sed tincidunt est. Nulla ex diam, semper vitae congue vel, dapibus in mi.

Select Program

Office of Multifamily Housing (MF Housing) ▾

Application Purpose and Type

Section of the Act

241(a) Improvement/Addition on 207 Apts ▾

Activity

Additions ▾

Timing of Insurance

Insurance of Advances ▾

MAP Project TAP Project

Property currently has an active Section 8 or PRAC contract.

0123456789

Property is already in the HUD insured, held or owned portfolio

Superseded FHA Project #1 ?

ABC-123456789

Superseded FHA Project #2

Superseded FHA Project #3

Parent/Primary FHA Project # ?

ABC-123456789

Mortgage Information

Borrower Type

Profit motivated ▾

Mortgage Amount

\$ 2,555,200

Lender Name

AGM - #74769

Permanent Interest Rate

3.75 %

Cash Out Requested

Cash Out Amount

\$ 1,000,000

% of Mortgage

39.13

Property Information

Project Name

Example Apartments

County

Anne Arundel ▾

Project Primary Street Address

2000 Hilltop Lane

Facility Type

Apartments ▾

City

Annapolis

Number of Sites

1

Scattered

State

MD ▾

Zip

21403

Congressional District

Existing Units

Revenue Units

245

Non-Revenue Units

18

Total Units

263

Units Being Added

Revenue Units

245

Non-Revenue Units

18

Total Units

263

LIHTC

None... ▾

Opportunity Zone

None... ▾

MIP Category

Select... ▾

HOME

RAD

CDBG

LIHTC Pilot

Upfront MIP

Annual MIP

-

-

Cancel

Submit Request

Field Name	Value
Activity	Purchase
	Refinance
	New Construction
	Rehab
	Improvements
	Additions
	Operating Loss
Timing of Insurance	Insured Upon Completion
	Insured Advances
Borrower Type	Condominium
	Investor Sponsor Cooperative
	Limited Dividend
	Management Type Cooperative
	Non-Profit
	Profit Motivated
	Public Body
	Sales Type Cooperative
Facility Type	Asst'd Living
	Single-Room Occupancy
	Apartment
	Coop
	Condo
	Mobile Home Park
	Critical Access Hospital
	Sole Community Providers
	Other
LIHTC	None
	4% LIHTC / Tax Exempt Bonds
	9% LIHTC
Opportunity Zone	None
	Yes, with Qualified Opportunity Fund
	Yes, without Qualified Opportunity Fund
MIP Category	Affordable
	Broadly Affordable
	Green/Affordable
	Green/Broadly Affordable
	Green/Market
	Market
	None

These are combined drop down values for all SOAs. Specific dropdown values are dependent on SOA

232 Request New FHA Number

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Select Program

Office of Residential Care Facilities (ORCF) ▾

Application Purpose and Type

Section of the Act

223(a)(7) Ref of 232 NC/SR Boa... ▾

Timing of Insurance

Insurance Upon Completion

Activity

Additions ▾

Property currently has an active Section 8 or PRAC contract.

Property is already in the HUD insured, held or owned portfolio

Superseded FHA Project #1 ?

ABC-123456789

Superseded FHA Project #2

Superseded FHA Project #3

Mortgage Information

Borrower Type

Profit motivated ▾

Mortgage Amount

\$ 2,555,200

Lender Name

AGM - #74769

Property Information

Project Name

Example Apartments

County

Anne Arundel ▾

Portfolio Name (optional)

AptPortfolio

Number of Sites

1 Scattered

Project Primary Street Address

2000 Hilltop Lane

Total Beds

189

Total Units

189

City Zip

Annapolis

State

MD ▾ 21403

Congressional District

Licensed Beds

SNF

18

Operating Beds

SNF

18

Licensed Units

SNF

18

Operating Units

SNF

18

B&C

18

B&C

18

B&C

18

B&C

18

MC

18

MC

18

MC

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MC

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AL

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AL

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ILU

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ILU

18

ILU

18

ILU

18

Added Beds

SNF

Removed Beds

SNF

Added Units

SNF

Removed Units

SNF

B&C

B&C

B&C

B&C

MC

MC

MC

MC

ICF

ICF

ICF

ICF

AL

AL

AL

AL

ILU

ILU

ILU

ILU

Special Characteristics

LIHTC

Opportunity Zone

None... ▾

MIP Category

Static MIP Category

Upfront MIP

1.2

Annual MIP

0.3

HOME

CDBG

Cancel

Submit Request

Field Name	Value
Activity	Purchase
	Refinance
	New Construction
	Rehab
	Improvements
	Additions
	Operating Loss
	Additions+Improvements
	Additions+Improvements + Equipment
	Improvements
	Additions
	Additions + Equipment
	Improvements + Equipment
	Equipment
Timing of Insurance	Insured Upon Completion
	Insured Advances
Borrower Type	Non-Profit
	Profit Motivated
Opportunity Zone	None
	Yes, with Qualified Opportunity Fund
	Yes, without Qualified Opportunity Fund

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Select Program

Office of Hospital Facilities (OHF)

Application Purpose and Type

Section of Act
223(a)(7) Refi of Operating Loss...

Timing of Insurance
Insurance Upon Completion

Property is already in the HUD insured, held or owned portfolio

Superseded FHA Project #1 ?
ABC-123456789

Superseded FHA Project #2
[Input Field]

Superseded FHA Project #3
[Input Field]

Financing Vehicle
GNMA Securities

Application Phase
Application

Mortgage Information

Borrower Type
Profit-motivated

Borrower's Legal Name
Shady Oaks Community Hospital

Lender Name
AGM - #74769

Mortgage Amount
\$ 2,555,200

Lender Business Name (optional)
AGM Mortgage

Permanent Interest Rate
3.75 %

Property Information

Project Name
Example Hospital

County
Anne Arundel

Project Primary Street Address
911 Emergency Drive

Facility Type
Sole Community Provider

City
Annapolis

State Zip
MD 21403

Congressional District
[Input Field]

Unit Breakdown

Licensed Beds Staffed Beds
245 245

Special Characteristics

Opportunity Zone
[Input Field]

MIP Category
Static MIP Category
Upfront MIP Annual MIP
1.2 0.3

Cancel

Submit Request

Field Name	Value
Financing Vehicle	Tax-Exempt Bonds
	GNMA
	Other
	Rehab
Timing of Insurance	Insured Upon Completion
	Insured Advances
Borrower Type	Non-Profit
	Profit Motivated
	Public Body
Facility Type	Critical Access Hospital
	Sole Community Provider
	Other













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Upload Application Files against Checklist


Signed in

Upload Application Files

Phasellus efficitur, augue eget rutrum congue, eros felis dignissim elit, sit amet commodo quam arcu vel quam. In sed mi nisi. Maecenas ullamcorper luctus augue. Nam non sem quis ante blandit placerat nec nec lorem.

Req'd	File Description	Uploaded File	Std Name	File Definition	N/A
✓	Section 1: Underwriting				
*	1-1(A) Check - FHA Application Fee		Check		<input type="checkbox"/>  
*	1-1(B) Transmittal Letter		TrsLtr		<input type="checkbox"/>  
*	1-1(C) Completed Application Checklist		FirmChkLst		<input type="checkbox"/>  
*	1-2(A) Lender's Underwriting Narrative		LndrNarr		<input type="checkbox"/>  
*	1-2(B) Identity of Interest Disclosure		IOIDis		<input type="checkbox"/>  
*	1-2(C) FHA Summary Report		FHARpt		<input type="checkbox"/>  
✓	Section 2: Third Party Reports				
✓	Section 3: Management Agent				
	Section 4: Property Documents				
✓	Section 5: Mortgage Credit				
	Section 6: Construction and Architectural Documents				

0 of 152 minimum required exhibits



Drag and drop here
or
[browse](#)

Back

Continue

Upload New Concept Package

Signed in as

CONCEPT MEETING PACKAGES

New Package Upload

File Upload	Upload Date	FHA #
Concept Meeting 12345	02/14/2018	012-3456789
Pilot 91547	02/14/2018	

Create New Concept Package

Instructional text. Aenean finibus cursus lorem, tempus dictum arcu. Sed vel eros eu dui congue fermentum sed tincidunt est. Nulla ex diam, semper vitae congue vel, dapibus in mi. Fusce eleifend lectus et neque sagittis porta. Phasellus efficitur,

Concept Package Name

City State Select HUD Region

OK

Other Document Type Upload

Signed in a

Project Information

Submissions to HUD

HUD Shared Docs

SUBMISSIONS TO HUD

Example Apartments

FHA # 05135782
AGM Lenders, Inc.
SOA: 221(d)(4)

Pre App (12)

Firm App (8)

Initial Closing (6)

Construction

Final Closing

Other

Other Exhibits (0)

No exhibits uploaded



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here or [browse](#).