

<b>Mortgage Record Change Section 232, Not for Commitment Assignments</b>	<b>U.S. Department of Housing and Urban Development Office of Residential Care Facilities</b>	OMB Approval No. 2502-0605 (exp. 03/31/2018)	
<p><b>Public reporting</b> burden for this collection of information is estimated to average 0.25 hours. This includes the time for collecting, reviewing, and reporting the data. The information is being collected to obtain the supportive documentation that 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. 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.</p>			
<p><b>Warning:</b> 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.</p>			
<p><b>Instructions:</b> Submit the original only to HUD within 15 calendar days from the date of change for the Section 232 insured mortgage.</p> <p><b>Sale of Mortgage:</b> It is the Seller's responsibility to submit this form. Boxes 1, 2, 3, and 5 through 14 must be completed by the Seller. Box 15 must be signed by an authorized official of the purchasing mortgagee. Signatures in boxes 14 and 15 are official notice to HUD that this insured loan has been sold in accordance with HUD regulations. Seller and purchaser agree that the purchaser succeeds to all rights and assumes all obligations of the Seller under the HUD contract of insurance. Upon receipt of this notice by HUD, the Seller will be released from its obligations under the contract of insurance. HUD will acknowledge receipt of this notice to the Seller and to the Purchaser by monthly computer listing.</p> <p><b>Change of Servicer:</b> Boxes 1, 2, 3, 5, 7, 8, 10, 12, and 15 must be completed.</p> <p><b>Change of Mortgagor:</b> Boxes 1, 2, 3, 5, 7, 8, 10, 12, and 15 must be completed.</p>	1. Type of Action: (mark all applicable boxes) <input type="checkbox"/> Change of Holding Mortgagee or Servicer <input type="checkbox"/> Sale of Mortgage <input type="checkbox"/> Change of Servicer		
	2. Original Amount of Mortgage:	3. FHA Project No:	Section of Act Code:
	4. RESERVED		
	5. Maturity Date: (month and year)		
	6. Construction Status:  <input type="checkbox"/> Construction is Completed <input type="checkbox"/> Construction is Uncompleted		
	7. Date of This Notice: (mm/dd/yyyy)	8. Date of Transfer: (mm/dd/yyyy)	
9. Selling Mortgagee: (mortgagee code no., name, address & ZIP code)	10. Purchasing Mortgagee: (mortgagee code no., name, address & ZIP code)		
11. Name of Present Mortgagor (or Previous Mortgagor if for a Mortgagor Change):	12. Service to Which Future Premium Notices Should be Sent: (mortgagee code no., name, address & ZIP code)		
13. Property Address: (include ZIP code)			
14. Selling Mortgagee: (Authorized Official) Name (Print):	15. Purchasing or Holding Mortgagee: (Authorized Official) Name (Print):		
Signature:	Signature:		
Phone Number:	Phone Number:		
Mail the completed form to: U.S. Department of Housing and Urban Development Multifamily Insurance Operations Branch PO Box 44124 Washington, DC 20026-4124			