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| **Request for Release  of Secured Party** | **U.S. Department of Housing and Urban Development**  Government National Mortgage Association | OMB Approval Number 2503-xxxx  Exp. (xx/xx/xxxx) |  |

Public Reporting Burden for this collection of information is estimated to average 3 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.

The information requested on this form is required by Sec. 306(g) of the National Housing Act, or by Ginnie Mae Handbook 5500.3. The purpose of this document is to provide Issuers the opportunity to request the release of the Secured Party Interest in the eNote, in order to effectively service the loan. The information collected will not be disclosed outside the Department without consent, except as required by law. Issuers are not required to respond to this collection unless a currently valid approved OMB control number is displayed on the form.

**Instructions:** Pursuant to Section 6210.00 of the Ginnie Mae Digital Collateral Guide (“eGuide,” Appendix V-7 of the MBS Guide), an eIssuer must request for the release of Ginnie Mae’s Secured Party interest by completing this form and submitting it via email to [DCPA@hud.gov](mailto:DCPA@hud.gov). The form must be signed by an agent of the eIssuer identified on the most recent Form HUD 11702 submitted to Ginnie Mae.

eIssuer Name:

eIssuer ID Number: Date Prepared by eIssuer:

The undersigned requests for the release of Ginnie Mae’s Secured Party interest for the loans described

below for the reason indicated.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **MERS MIN** | **eIssuer  Loan #** | **Pool #** | **FHA/VA/RHS/  §184 Number** | **Loan**  **Securitized?\*** | **Reason** | **Comments** |
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\**If the loan is not securitized select N/A for the Reason and provide an explanation in the Comments.*

*Additional loans can be provided on a separate spreadsheet.*

Authorized Signature:

Date:

Name:

Title:

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