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Warning: 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.

Part I - Mortgagor's Application Section A. Introduction									
Mortgagor's Legal Name:			[H	Enter Mortgagor	's Legal Nam	e]	Project Number	: [Enter Number]	
Date Prepared: [Enter Dat	te]	Section	of the Act	[Please sel	ect] M	ortgage Amount Requested	l:[Enter	Amount]	
B. Project Background Information	n								
1. Property Street Address:							2. City/Town:		
[Enter Property Street Address]							[Enter City/Town]		
3. County:		4	I. State or	Territory:	5. Zip Code:	6. Number of Licensed Beds:	7. Critical Access Designation?	8. Project Type:	
[Enter County]		ı	Please sel	ect]	[Enter Zip]	[Enter # of Beds]	[Please select]	[Please select]	
9.Entity Type:		,		ing Source:	11. (1. Calendar Days in Construction	
[Please select]		[Enter De	scription]				[Enter Calendar I	Days]	
C. Total Estimated Replacement Cost	of Proje	ct			Legal, Organ	ization, Consultant, AMPO,	•		
Total Construction Cost Per Contracts			Amount]		22. Legal	(Borrower)	[Enter Amount]		
Fees	· ·	, ,			23. Organ	<u> </u>	[Enter Amount]		
2. Architect's Fee - Design		[Enter A	Amount]			nl Tax Assessment	[Enter Amount]		
3. Architect's Fee - Supervisory		-	Amount]		_	ltant/Cost Cert Audit Fees*	\$ -		
4. Construction Mgmt. Fee-Part A			Amount]		26. AMP0		[Enter Amount]		
5. Other Fees (Identify Separately)*		\$	-			Legal, Organization, etc. (Li		\$ -	
6. Total Fees (Lines 2 through 5)				s -		Soft Costs (Lines 21 & 27)		\$ -	
Other				1	29. Total	Estimated Project Cost (Line	es 11 & 28)	\$ -	
7. Contingency		[Enter A	Amount]			wer's Existing Land & PP&E		\$ -	
8. Other (Identify)*		\$	_			& PP&E to be purchased for P	roiect*	\$ -	
9. Total Other (Lines 7 & 8)		1.4		\$ -		32. Total Estimated Replacement Cost of Project (lines 29, 30, & 31)			
10. Equipment and Furnishings*				\$ -	D. Estima	nted Cash Requirements – So	ources and Uses		
11. Total Hard Costs (Lines 1, 6, 9, & 1	.0)			\$ -	_	stimated Project Cost (from C		\$ -	
Carrying Charges and Financing						nced Capital Debt*		s -	
12. Interest*:months @%		l				se Price of Property to be Acqu	uired*	\$ -	
On \$		\$	-			Project Uses (Lines D1 through		\$ -	
13. Taxes		[Enter A	Amount]			unding Requirement. (Identify		\$ -	
14. Insurance*		\$	_			unding Requirement (Identify		s -	
15. FHA Mortgage Insurance Prem.		[Enter A	Amount]			Jses of Funds (Lines D4 throu	•	\$ -	
16. FHA Examination Fee*	0.3%	\$	-			sured Loan amount	<u>, , , , , , , , , , , , , , , , , , , </u>	\$ -	
17. FHA Inspection Fee*	0.0%	\$	-		9. Less Gr	rant or Approved Loans (if any	y)*	\$ -	
18. Permanent Financing Fee*	0.0%	\$	_			Other FHA Cash Requirements		[Enter Amount]	
19. Initial Service Charge	0.0%	[Enter A	Amount]		11. Cash l			s -	
20. Title and Recording	-	[Enter A	Amount]			Estimated FHA Cash Requi	rements	s -	
21. Total Carrying Charges and Finan (Lines 12 through 20)	cing			\$ -		ormation on Leased Propo perty to be mortgaged held pu			
Please note: The line items in the HUD-9	92013-O	HF are sum	marv in na	ature. Applicants	1	Yes / No [Please select			
must provide sufficient detail for each of the line items contained within this form to				1.	If so, value				
allow for expedient processing.					2. Non-Fl	HA cash requirements:			
(*) Please refer to "Additional Schedules	" to com	plete requi	red fields.			escription]			

F. Sponsors	1. Name of Sponsor or Co-Sponsor	:		Telephone Number:
	[Enter Name of Sponsor or Co-Sp	onsor]		[Enter Telephone Number]
	Address: [Enter Address of Sponsor or Co-	Cnoncoul		
	Enter Address of Sponsor of Co-	Sponsory		
	Name of Sponsor or Co-Sponsor:			Telephone Number:
	[Enter Name of Sponsor or Co-Sp	oonsor]		[Enter Telephone Number]
	Address:			1
	[Enter Address of Sponsor or Co-	Sponsor]		
	2. Relationship between Sponsoring [Enter Description]	Group and Mortgagor	(Existing Connections or Proposed if Mo	ortgagor has not been formed).
Secretary of Hous	ing and Urban Development under the ab	ove identified section of the	ge, certify(ies) that they are familiar with the e National Housing Act and that to the best of which are prerequisite to insurance of the i	of his/her (their) knowledge and belief the
any way false or i		e of the project or property	e and belief no information or data contained which is intended as the security for the pro	
Attest:	[Enter Name of	Sponsor]	Date:	[Enter Date]
Signature: (Spons	or) [Signature of Sp	ponsor]	Date:	[Enter Date]
Part II - Mort	gagee's Application			
Pursuant to the pro	ovisions of the Section of the National H	ousing Act identified in the	Mortgagor's application and HUD Regulation	ons applicable thereto, application is
•			e application of the Mortgagor. After examir	
-			d is interested in making the loan in the princ	
	<pre>Inter Spelling of Principal Amount] ge] %, will require repayment of principal</pre>	Dollars ([Enter Numeric Amount] nter # Months] months. Said loan will be	_), which will bear interest at
			ances during construction (if applicable) is	
	, , , , , , , , , , , , , , , , , , , ,		, , ,	
			ent, its own final action and the payment of i	=
	<u> </u>	of Service Charge Amoun		Amount]) is subject to
adjustment so that	the total will not exceed (Enter F	Percentage] %) of the amou	ant of your commitment.	
Discount or Perma	anent Financing Fee for the mortgage is	[Enter Percentage] %.		
Attached is a proop	of of payment for [Enterplication fee required by said HUD Regu	er Spelling of Payment Am	nount] Dollars ([Enter Nu	nmeric Amount]), which is in
Mortgagee:			Signature:	
[Enter Name of N	Mortgagee]		[Signature of Officer]	
Address:			Name & Title of Officer:	
Address: [Enter Address o	f Mortgagee]		[Enter Name and Title of Officer]	
Original Ce	rtificate of Need Attached	Original Certifica Furnished	te of Need Previously	Certificate of Need Not Required

C.5 Other Fees (NOT Included in the Construction Contract(s))

Attach a listing and amount for each proposed consultant.

C.5(a) Survey, Soil, and Other Reports	[Enter Amount]
C.5(b) Permits	[Enter Amount]
C.5(c) Inspections	[Enter Amount]
C.5(d) Construction Technical Consultant	[Enter Amount]
C.5(e) Owner's Representative	[Enter Amount]
C.5(f) Architect's Fee - Additional Services	[Enter Amount]
C.5(g) Other - Please Specify:	[Enter Amount]
C.5(h) Other - Please Specify:	[Enter Amount]
C.5(i) Other - Please Specify:	[Enter Amount]
C.5 Other Fees (Identify Separately)	\$ -

C.8 Other (NOT Included in the Construction Contract(s))

Examples include, but are not limited to, asbestos removal, owner testing & independent inspection costs, printing costs, performance and payment bond premiums, environmental review, traffic work, and demolition work not included in the construction contract, etc. if paid directly by the Owner. (Do not include purchase of land, which goes on C.31)

C.8(a) Please Specify:	[Enter Amount]
C.8(b) Please Specify:	[Enter Amount]
C.8(c) Please Specify:	[Enter Amount]
C.8(d) Please Specify:	[Enter Amount]
C.8(e) Please Specify:	[Enter Amount]
C.8(f) Please Specify:	[Enter Amount]
C.8(g) Please Specify:	[Enter Amount]
C.8 Other (Identify)	\$ -

C.10 Equipment and Furnishings

The costs related to the purchase and installation of equipment by the owner, the firm selling the equipment, or an entity other than the contractor goes on line C.10. Costs related to purchase or installation by the contractor go on line C.1.

	Costs Incurred by Owner	
	Purchase Price	Installation Costs
C.10(a) Moveable Equipment	[Enter Amount]	[Enter Amount]
C.10(b) Furnishings	[Enter Amount]	[Enter Amount]
C.10(c) Fixed Equipment (Not part of Construction Contract)	[Enter Amount]	[Enter Amount]
C.10(d) Limited Rehab	[Enter Amount]	[Enter Amount]
C.10 Equipment and Furnishings	•	•

C.12 Interest

Please refer to Appendix 4 of HUD Handbook 4615.1 for specific guidance regarding the determination of Capitalized Interest. Interest expense related to a bridge loan covering precommitment or early start work must be approved by HUD in advance to be eligible for inclusion in the insured loan and on Line C.12.

C.12(a) Capitalized Interest	[Enter Amount]
C.12(b) Bridge Loan Interest/Early Start Work	[Enter Amount]
C.12 Other (Identify)	\$ -

C.14 Insurance

Provide a schedule detailing the nature and cost of construction project insurance coverage. Exclude contractor paid insurance.

C.14(a) Please Specify: C.14(b) Please Specify:	[Enter Amount] [Enter Amount]
C.14(c) Please Specify:	[Enter Amount]
C.14(d) Please Specify:	[Enter Amount]
C.14(e) Please Specify:	[Enter Amount]
C.14(f) Please Specify:	[Enter Amount]
C.14(g) Please Specify:	[Enter Amount]
C.14 Insurance	\$ -

C.16 FHA Examination Fee

C.16(a) Application Fee	-
C.16(b) Commitment Fee	-
C.16 FHA Examination Fee	\$ -

C.17 FHA Inspection Fee

C.17(a) Prorated Fee at Precommitment or Early Start	[Enter Amount]
C.17(b) Remaining Fee	[Enter Amount]
C.17 FHA Inspection Fee	\$ -

C.18 Permanent Financing Fee

If other third party expenses associated with the Permanent Financing Fee (i.e., legal) are billed directly to the borrower, list separately, by category, below.

C.18(a) Please Specify:	[Enter Amount]
C.18(b) Please Specify:	[Enter Amount]
C.18(c) Please Specify:	[Enter Amount]
C.18 Permanent Financing Fee	\$ -

C.25 Consultant/Cost Cert Audit Fees

Consultant fees (other than those listed below) are allowable only for nonprofit and governmental hospitals and then only to the extent that it involves work in connection with plans and specifications and the selection and purchase of equipment. Not allowable is the cost of conducting feasibility studies to determine need for construction or modernization of a facility. Do not include design and construction related consultant fees here as they are on C.5.

C.25(a) Financial Forecast	[Enter Amount]
C.25(b) Cost Certification	[Enter Amount]
C.25(c) Independent Appraisal	[Enter Amount]
C.25(d) Other - Please Specify:	[Enter Amount]
C.25 Consultant/Cost Cert Audit Fees	\$ -

C.30 Borrower's Existing Land & PP&E to be included in Collateral

Please refer to Appendix 4 of HUD Handbook 4615.1 for specific guidance for determining the valuation of existing land, plant, property, and equipment.

	Existing Land and PP&E
C.30(a) Net Book Value based on Most Recent Audit OR Replacement Cost based on HUD Approved Appraisal	[Enter Amount]
C.30(b) Less: Property that will be Excluded from Mortgagor	[Enter Amount]
C.30(c) Less: Loss of Value or Destruction as a Result of Project	[Enter Amount]
C.30(d) Less: Capital or Operating Leases Included on the Balance Sheet	[Enter Amount]
C.30(e) Less: Site Demolition Costs for Existing Structures	[Enter Amount]
C.30(f) Less: Leasehold Interest pursuant to Ground Lease	[Enter Amount]
C.30(g) Less: Reductions for Property Held Pursuant to a Ground Lease	[Enter Amount]
C.30 Borrower's Existing Land & PP&E to be included in Collateral	\$ -

C.31 Land & PP&E to be purchased for Project

Include below the value of acquired land or land improvements, such as a building, inclusive of its contents.

C.31(a) Fair Market Value of Land to Be Purchased	[Enter Amount]
C.31(b) Replacement Cost of Plant, Property, and Equipment to be Purchased	[Enter Amount]
C.31 Land & PP&E to be purchased for Project	\$ -

D.2 Refinanced Capital Debt

Please provide a description (e.g., lender name, instrument name, identifier) for each indebtedness included in D.2.

The maximum amount of swap termination costs that may be included on line D.2 is 10% of the amount of the requested insured loan amount on line D.8 for 223(f), and 5% of the insured loan amount on line D.8 for all other projects. Any swap termination costs in excess of the amount permitted to be included in the mortgage should be reflected on line D.5 or line D.6.

	Capital Debt #1	Capital Debt #2	Capital Debt #3	
	[Enter Description]	[Enter Description]	[Enter Description]	Subtotals
D.2(a) Unpaid Principal Balance	[Enter Amount]	[Enter Amount]	[Enter Amount]	-
D.2(b) Accrued Interest	[Enter Amount]	[Enter Amount]	[Enter Amount]	-
D.2(c) Prepayment Penalties	[Enter Amount]	[Enter Amount]	[Enter Amount]	-
D.2(d) Swap Termination Costs Permitted	[Enter Amount]	[Enter Amount]	[Enter Amount]	-
D.2(e) Other Financing Costs Approved by HUD	[Enter Amount]	[Enter Amount]	[Enter Amount]	-
D.2(f) Disallowed (Non-mortgageable) Costs	[Enter Amount]	[Enter Amount]	[Enter Amount]	-
Total Payoff Amount	-	•	•	-

Total Payoff Amount of Refinanced Capital Debt	-
Less: Disallowed Costs (Non-Mortgageable)	-
D.2 Refinanced Capital Debt	-

D.3 Purchase Price of Property to be Acquired

The purchase price for items that do not qualify as capital debt should not be included on this line, but on D.5 or D.6 (Other Funding Requirements).

D.3(a) Purchase Price	[Enter Amount]
D.3(b) Less: Goodwill	[Enter Amount]
D.3(c) Less: Current Assets in Excess of Current Liabilities	[Enter Amount]
D.3(d) Less: Certificate of Need	[Enter Amount]
D.3(e) Less: Licenses and Certificates	[Enter Amount]
D.3(f) Less: Trained Workforce in Place	[Enter Amount]
D.3(g) Less: Contracts-in-Place	[Enter Amount]
D.3(h) Less: Net Present Value of Future Revenues	[Enter Amount]
D.3 Purchase Price of Property to be Acquired	\$ -

D.5 & D.6 Other Funding Requirements

D.5(a) Amount of Permanent Loan Discount	[Enter Amount]
D.5(b) Amount Required to Pay Off Non-Capital Debt	[Enter Amount]
D.5(c) Amounts to Pay Off Outstanding Lines of Credit	[Enter Amount]
D.5(d) Other - Please Specify:	[Enter Amount]
D.5 Other Funding Requirement	\$ -

D.6(a) Special Escrows	[Enter Amount]
D.6(b) Swap Termination Costs in Excess of Amounts Permitted in D.2	[Enter Amount]
D.6(c) Additional Working Capital	[Enter Amount]
D.6(d) Other - Please Specify:	[Enter Amount]
D.6 Other Funding Requirement	\$ -

D.9 Less Grant or Approved Loans

D.9(a) Grants	[Enter Amount]
D.9(b) Approved Loans	[Enter Amount]
D.9(c) Gifts	[Enter Amount]
D.9(d) Other - Please Specify:	[Enter Amount]
D.9(e) Other - Please Specify:	[Enter Amount]
D.9(f) Other - Please Specify:	[Enter Amount]
D.9 Less Grant or Approved Loans	\$ -