**HUD Form #92464-ORCF, Request for Approval**

**of Advance/Release of Escrow Funds**

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| --- | --- | --- |
| **LOCATION** | **CURRENT TEXT** | **REVISED TEXT** |
| p. 1 | **Public reporting burden** for this collection of information is estimated to average 1 hour 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 agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless that collection displays a valid OMB control number. | **Public reporting burden** for this collection of information is estimated to average 1 hour 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 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. Response to this request for information is required in order to receive the benefits to be derived from the National Housing Act Section 232 Healthcare Facility Insurance Program. 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. While no assurance of confidentiality is pledged to respondents, HUD generally discloses this data only in response to a Freedom of Information Act request. |
| p. 1 | **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. | **Warning:** Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802). |
| p. 1 | Request for Approval of Advance/Release of Escrow Funds: Completed by the depository institution. Submit to HUD in duplicate. | Request for Approval of Advance/Release of Escrow Funds: Completed by the depository institution. Submit to HUD in duplicate if a wet signature is required by the Lender. |
| p.1 | New line | Green MIP repairs/retrofits |
| p.2 | Note: Original and one (1) copy must be signed. | Deleted Note. |
| p. 3 | New line | Green MIP Retrofits  1Change Orders involving Green MIP items are prohibited unless the proposed changes are first approved in writting by the green energy professional for the project.  2Green MIP Retrofit items must be identified with an asterisk in the below schedule of values. |
| p. 4 | This form is to be submitted in duplicate, along with invoices labeled with each line item number (1., 2., …) entered as the first column is completed. | This form is to be submitted in duplicate if required by the Lender, along with invoices labeled with each line item number (1., 2., …) entered as the first column is completed. |
| p. 4 | Firm Commitment Exhibit A or C (depending upon year of Firm Commitment) Repair List, or Construction Change Request Number or Item | Firm Commitment Exhibit A or C (depending upon year of Firm Commitment) Repair List, or Construction Change Request Number or Item. (Green MIP Retrofits items must be identified with a tripple asterisk\*\*\*) |
| p. 5 | New line | Less Retained |