

This Office has approved (Check (X) appropriate boxes.) This is your authority to adjust the Reserve requirements accordingly. This authority is revocable upon written notice from HUD.

A suspension of Deposits to the Reserve from the date of (mm/dd/yyyy) _____ to the date of (mm/dd/yyyy) _____.

A suspension of Deposits to the Reserve as long as a balance of \$ _____ is maintained.

A change in the Monthly Deposit to the Reserve from \$ _____ to \$ _____ effective the date of (mm/dd/yyyy) _____ through the date (mm/dd/yyyy) _____.

I, _____, certify that: Funds expended **have been or will be** used for the work indicated in this request; I **have inspected/will inspect** the work and **have determined/will determine** that the damaged area(s) or equipment have been restored to as good or better condition; No mechanic's or material man's liens **have been or will be** attached to the property as a result of the repair; The repairs **have been or will be** completed in accordance with all applicable building codes and ordinances; all contract materials, supplies, and services, as applicable, have been obtained at the most reasonable costs and on terms most advantageous to the property; all discounts, rebates, and commissions have been credited to the property; any expenditures that are determined in a review by HUD (or the Mortgagee) to be ineligible, will be repaid (from non-project funds) to the property's Reserve Fund.

All goods and services purchased from individuals or companies with which the Borrower, Operator or Management Agent has an identity-of-interest were or will be purchased at costs not in excess of those that would have been incurred in making arms-length purchases on the open market. (All identity of interest transactions must be specifically identified in the project's annual financial statements.)

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| <p>Request Initiated and Certified by:</p> <p>(Please check all that apply)</p> <p><input type="checkbox"/> Borrower <input type="checkbox"/> Operator <input type="checkbox"/> Lessee</p> <p><input type="checkbox"/> Management Agent</p> | <p>Request Submitted and Reviewed by Mortgagee:</p> <p>(Please include entity name and contact name)</p> |
| <p><input type="checkbox"/> Check here if any address, telephone number, fax or email updates</p> | <p><input type="checkbox"/> Check here if approved under delegated processing</p> |
| <p>Signature: _____</p> <p>Name and Title (authorized agent): _____</p> | <p>Signature: _____</p> <p>Name and Title: _____</p> |
| <p>This is your authority to release the following amounts from the reserve: _____</p> <p>To be signed by ORCF only if not delegated to the Lender or Approved through the HUD Portal</p> <p>ORCF Account Executive: (please type or print Name): _____ Signature: _____ Date (mm/dd/yyyy): _____</p> | |