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| **Borrower’s Certification- Full or Partial Completion of Non-Critical Repairs**  Section 232 | **U.S. Department of Housing**  **and Urban Development**  Office of Residential  Care Facilities | OMB Approval No. 2502-0605  (exp. 11/30/2022) |

**Public reporting** **burden** for this collection of information is estimated to average 0.5 hours 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.

**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).

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| To: U. S. Department of Housing and Urban Development ("HUD") | Project Name: |
| And to:      **("Lender" or Servicer)** | FHA Project Number: |

[Enter Borrower Name], a [Enter Borrower type, e.g., LLC] organized and existing under the laws of (Enter State) (the "Borrower"), the Borrower of the above-referenced project located at  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ,  \_\_\_\_\_\_\_\_\_\_\_\_\_  ,  \_\_\_\_\_  (the "Project"), hereby certifies to HUD and Lender or Servicer as follows:

1. The Project is being or has been financed with proceeds of a mortgage loan (the “Loan”) in the principal amount of $\_\_\_\_\_\_\_\_\_\_ from the Lender to the Borrower, which Loan will be or is insured by HUD pursuant to the certain Commitment to Insure Upon Completion dated \_\_\_\_\_\_\_\_\_\_ (as the same may be amended from time to time, the “firm Commitment”).
2. At Loan closing, an escrow totaling $      was established. This escrow amount included $      which represents 100% of the estimated cost of all Non-Critical Repairs and/or Borrower-elected Repairs, and an additional escrow amount of $     , which represents \_\_\_% of the cost estimate to be held in cash or Letter of Credit.
3. Pursuant to the terms of the Firm Commitment, the Borrower is obligated to complete Project repairs as described in the list of Non-Critical Repairs and/or Borrower-elected Repairs, within 12-months of Loan closing.
4. The attached Form HUD-92464-ORCF, Request for Approval of Advance of Escrow Funds, Advance Number     , includes any corresponding photographs and invoices, documenting the completed Non-Critical Repairs and/or Borrower-elected Repairs for this advance.

(Attached hereto are corresponding photographs and invoices, documenting the completed Non-Critical Repairs and/or Borrower-elected Repairs.)

1. The Borrower hereby certifies that the completed Non-Critical Repairs and/or Borrower-elected Repairs are acceptable and have been completed in a good and workmanlike manner.
2. During the course of repairs, HUD and its representatives shall at all times have access to the Project and the right to inspect the progress of the repairs. The Borrower is aware that periodic spot inspections may be made by HUD and its representatives, to verify completion of repairs.
3. The Lender shall have the right, but not the obligation to use funds in the repair escrow account to complete any repairs not completed and accepted by the Secretary within the prescribed timeframe.

Borrower hereby certifies that the statements and representations contained in this instrument and all supporting documentation thereto are true, accurate, and complete and that each signatory has read and understands the terms of this instrument.  This instrument has been made, presented, and delivered for the purpose of influencing an official action of HUD in insuring the Loan, and may be relied upon by HUD as a true statement of the facts contained therein.

Date:      **BORROWER**

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| [Enter Borrower Name]  a(n) [Enter Borrower Type, e.g., LLC]  By:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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