

Statement of Taxes

U.S. Department of Housing and Urban Development  
Office of Housing - Federal Housing Commissioner

OMB Approval No. 2502-0418 (exp. 07/31/2025)

Street Address of Property

City

County

State

Project Number

Name and Mailing Address of Owner

Public reporting burden for this collection of information is estimated to average 30 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. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

HUD uses this information to update its records of the mortgagor's real estate taxes, the location (lot and block numbers) of the property, taxes due dates, and penalty dates. The information can be used to verify the last taxes paid during an audit for insurance benefits. This information is required by Statute 12 USC 1713(g) and Title II, Section 207(g) of the National Housing Act. The debtors a protected by the Privacy Act of 1974. There is no sensitive information be collected.

Kind of Tax or Assessment	For Year	Tax Year		Annual Amount	How Paid?	Date(s) Payable	Penalty	Date(s)	Date Tax Paid <small>in installments, indicate which installments have been paid.</small>	Official to Whom Payable (Title and Address)
		MM/DD/YYYY	MM/DD/YYYY							
					<input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Annually					
					<input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Annually					
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					<input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Annually					

Use this space to give complete information for each kind of tax and penalties which are charged for failure to pay bills before delinquent dates. If no bills are rendered, describe fully the procedure to determine taxes of assessments charged against a property. Give all additional information obtainable regarding local tax rules and regulations. Tax bills for each kind of tax, whether paid or unpaid, and tax receipts should be forwarded with this form.

Property description  
(as shown on assessment roll)

CERTIFICATION: I/We, the undersigned, certify under penalty of perjury that the information provided on this form is true, accurate, and correct. 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, 1014; 31 U.S.C. §3729, 3802).

Send original and 1 copy to the:  
U.S. Department of Housing and Urban Development  
Multifamily Claims Branch, HWAFCR, Room 6252  
451 7th Street, SW  
Washington, D.C. 20410 - 8000

Use as many copies of this form as necessary.

Signature of Attorney or other person acting for mortgagee

Date

form HUD-434 (12/09)  
ref. Handbook 4110.2