

Single-Family Application for Insurance Benefits

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

OMB Approval No. 2502-0429
(Expires 02/28/2027)

Privacy Notice: The National Housing Act as amended (12 U.S.C. 1701 et seq.); Section 7(d) of the Department of Housing and Urban Development Act (42 U.S.C. 1437e(d)), 24 CFR 5.210; 24 CFR 200.1101; 24 CFR 203.35; Data on this form is collected to obtain a Federal Housing Administration (FHA) mortgage insurance benefits payment on an endorsed single family mortgage. The data collected is evaluated to ensure program compliance. Providing all information on the form is voluntary. Insurance benefits may not be disbursed if all information is not provided.

Write numeric date where indicated (i.e. MM-DD-YYYY). General Information

1. Claim Type		31-Spec. Forb.		2. FHA Case Number	
<input type="checkbox"/> 01-Conveyance	<input type="checkbox"/> 03-Automatic Assignment	<input type="checkbox"/> 05-Supplemental	<input type="checkbox"/> 07-PFS	<input type="checkbox"/> 32-Modification	
<input type="checkbox"/> 02-Assignment	<input type="checkbox"/> 04-Coinsurance	<input type="checkbox"/> 06-CWCOT	<input type="checkbox"/> Other	<input type="checkbox"/> 33-Partial Claim	
3. Section of the Act Code		4. Default reason code (2 digits)		5. Endorsement date (from MIC)	
7. Due date of first payment to principal and interest a. Original b. Modified		8. Due date last complete installment paid		9. Date of possession and acquisition of marketable title	
11. Date foreclosure proceedings <input type="checkbox"/> a. Instituted <input type="checkbox"/> b. Date of deed in lieu		12. Holding mortgagee number (payee) (10 digits)		13. Servicing mortgagee number (10 digits)	
15. Mortgage amount a. Original b. Modified		16. Holding mortgagee EIN (9 digits)		17. Unpaid loan balance as of date in block 8 (Item 11 if coinsurance)	
19. Expiration date of extension to foreclose/assign		20. Date of notice/Extension to convey		21. Date of release of bankruptcy, if applicable	
23. If Item 22 is No, date of local HUD Office approval		24. Is property conveyed damaged? <input type="checkbox"/> Yes <input type="checkbox"/> No		22. Is property vacant? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		25. If Item 24 is Yes, date of: a. Local HUD Office approval (pursuant to 203.379(a)(1))		b. Certification (pursuant to 203.379(a)(2))	
26. Type of Damage <input type="checkbox"/> Tornado <input type="checkbox"/> Boiler explosion (Condominium units only) <input type="checkbox"/> Fire <input type="checkbox"/> Damage (203.378) <input type="checkbox"/> Flood <input type="checkbox"/> Earthquake				27. Recovery or estimate of damage	
28. Is mortgagee successful bidder? <input type="checkbox"/> Yes <input type="checkbox"/> No		29. Deficiency Judgment Code		30. Authorized bid amount	
				31. Mortgagee reported curtailment date	

32. Schedule of Tax Information

Tax Year	Type of tax or assessment	Collector's property identification	Amount paid	Period covered		Date paid
				From	To	

33. Mortgagor's or HECM Borrower's name, and property address	34. Brief legal description of property

Certification: The undersigned agrees that in the event of damage by fire (except as otherwise provided in section 203.379(b) of the HUD regulations; flood, earthquake, tornado, or boiler explosion, if applicable, the Secretary may deduct from the settlement to be made to the mortgagee an amount computed in accordance with the applicable HUD regulations. For conveyance claims, the undersigned further agrees: (1) that in the event the Secretary finds it necessary to reconvey the above described property to the mortgagee, because of the mortgagee's noncompliance with HUD regulations, the mortgagee shall reimburse the Secretary for any settlement made in debentures and/or cash and for all cash disbursements, including those for repairs and rehabilitation of the property, made by the Secretary; and (2) that if a mortgagee does not comply with HUD regulations, the mortgagee remains responsible for the property, and any loss or damage thereto, notwithstanding the filing of the deed to the Secretary for record, and such responsibility is retained by the mortgagee until HUD regulations have been fully complied with (203.379). For HECM claims, the undersigned hereby certifies under the penalty of perjury that the foregoing is true and correct: 1) the mortgage is prior to all mechanics' and materialmen's liens filed of record, regardless of when such liens attach, and prior to all liens and encumbrances, or defects which may arise except such liens or other matters as may have been approved by the Commissioner; 2) the amount stated in the instrument of assignment is actually due and owing under the mortgage; and 3) there are no offsets or counterclaims thereto and the mortgagee has a good right to assign. **I/We**, the undersigned, certify under penalty of perjury that the information provided above is true 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)

35. Name & address of Mortgagee (include Zip Code)	36. Name & address of Mortgagee's servicer (include Zip Code)
37. Mortgagee official signature, date & title. (Signature not necessary if signed by (Servicer))	38. Servicer signature, date & title.

Please see HUD Handbook 4000.1, FHA Single Family Housing Policy Handbook for submission instructions for forward mortgage insurance claims.

Continuation of Application

39. Amount of monthly payment to: a. FHA Insurance	b. Taxes	c. Hazard Insurance	d. Interest & Principal
40. If Bankruptcy filed, enter date filed	41. If conveyed/assigned damaged, date damage occurred	42. Date HIP cancelled or refused, if applicable	43. Number of living units

44. Status of Living Units

Unit #1. a. <input type="checkbox"/> Vacant <input type="checkbox"/> Occupied (Enter name of occupant)	b. Date vacated, if applicable	c. Date secured, if applicable
Unit #2. a. <input type="checkbox"/> Vacant <input type="checkbox"/> Occupied (Enter name of occupant)	b. Date vacated, if applicable	c. Date secured, if applicable
Unit #3. a. <input type="checkbox"/> Vacant <input type="checkbox"/> Occupied (Enter name of occupant)	b. Date vacated, if applicable	c. Date secured, if applicable
Unit #4. a. <input type="checkbox"/> Vacant <input type="checkbox"/> Occupied (Enter name of occupant)	b. Date vacated, if applicable	c. Date secured, if applicable

45. Modified Interest Rate	46. New Maturity Date	47. Interest Rate (prior to modification)	
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Mortgagee's comments, if any.

HUD's comments, if any.

Public reporting burden for this collection of information is estimated to average 2 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. Comments regarding the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to the Reports Management Officer, REE, Department of Housing and Urban Development, 451 7th St SW, Room 4176, Washington, DC 20410-5000. When providing comments, please refer to OMB Approval No. 2502-0429. This information is being collected to file a claim for Single Family Federal Housing Administration (FHA) insurance benefits. This information is required to obtain mortgage insurance benefits. HUD may not collect this information, and you are not required to complete this form, unless it displays the currently valid OMB control number 2502-0429.

Sensitive Information. Some information collected on this form is considered sensitive and is protected by The Privacy Act.

Reference Handbook 4000.1 for forward mortgages.

Previous versions obsolete

Part A, cont.

form HUD-27011
(10/2023)

Gjbl `Y!: Ua]m5 dd`jWUjcb`Zcf`bgi fUbWV'6 YbYzJhg

DURh6 88888 jgwU'8 UHJ

32200 qti ci qt)u'qt'J GEO 'Dqttqy gt)u'P co g'cpf 'Rtqr gtv{ 'Cff tguu"	3230HJ C'Ecuq'P wo dgt"	324'Ugevkqp"qh'CevEqf gUgevkqp"qh'CevEqf g"
	32500 qti ci gg)u'tghgtgpeg'pwo dgt"%o cz037'f ki kuu"3260F cvg'hqto 'r tgr ctgf "	
	3270Gzr 0f cvg'q'Uwdo k/Vkng'Gxkf gpeg."	3280Ej genikh'uwr r ngo gpvni' <div></div>
	qt'hkuecnf cvc'hqt'Rctv"D"	

Nlpg" P wo dgt"	F guetkr vkqp"	Eqnwo p'CF gf vevkpu"	Eqnwo p'D Cf f kskpu"	Eqnwo p'E kpgt guv'
3290' Cf lwwv gpn'vq'Nqcp'Dcmpeg"%h'f khtgtpv'itqo 'Kgo '39.'RctvC+"				
32: 0' UengIDkf'qt'Crr tckucn'Xcnwg"%h'qt'Eqlpuwcppeg'qt'P qpeqpxg{ cpeg+"				
32: 0' Guetqy 'Dcmpeg"%cu'qh'f cvg'lp'Kgo '32.'RctvC+"				
3320' Vqvni'F kudwugo gpw'hqt'Rt qvevkqp'cpf 'Rt gugtxcvkqp"%htqo 'hpg"486.'RctvE+"				
3330' Vqvni'F kudwugo gpw"%htqo 'hpg"527.'RctvF +"				
3340' Cwqtpg{ lVtwngg'Heggu'RcKf"%htqo 'hpg"528.'RctvF +"				
3350' Hgtgenuwg.'Ces wukskqp.'Eqpxg{ cpeg.'cpf 'Qvj gt'Equu"%htqo 'hpg"529.'RctvF +"				
3360' Dcpntwr ve{ 'Hgg"%h'crr rdecdrg+"%htqo 'hpg"532.'RctvF +"				
3370' Tgpvni'kpego g"				
3380' Tgpvni'Gzr gpug."				
3390' Vqvni'VeZgu"qp'F ggg' "%htqo 'hpg"52: .'RctvF +"				
33: 0' Tgeqxtg{ 'qt'F co ci g' "%h'pqv'tgr qtvgf 'qp'RctvC+"%Wug'hpg"33; 'h'tgr qtvgf 'qp'RctvC+"				
33: .f Gunko cvg'qt'Tgeqxtg{ 'Htqo 'RctvC'&aaaaaaaaaaaaaaaaaaaaa"				
Ngui'Vqvni'kpuwcppeg'Tgeqxtg{ " aaaaaaaaaaaaaaaaaaaaaa				
Cf lwwgf 'Co qwpv'r nu'qt'o lpuw+"&" aaaaaaaaaaaaaaaaaaaaaa				
3420' Ur gekni'Cuuguo gpw'F q'P qv'Wug'hqt'Eqlpuwcppeg"%htqo 'hpg"52: .'RctvF +"				
3430' O qti ci g'P qv'kpgt guv'cuuki po gpw'eqkpuwcppeg'cpf 'ur gekni'htdgctcpeg'ci tgggo gpw'qpn' +"				
Htqo 'aaaaaaaaaaaaaaaa "Vq'aaaaaaaaaaaaaaaa "Tcvg'aaaaaaaa " "				
3440' O qti ci g'kpuwcppeg'Rtgo kwo u"%htqo 'hpg"533.'RctvF +"				
3450' Wpcrr rkg'Ugevkqp'457'Cuukncpeg'Rc{o gpw'Gctpgf 'Cuukncpeg'qpn' +"				
3460' "Qxgtr ckf'Ugevkqp'457'Cuukncpeg'Rc{o gpw"				
"Eqlpuwcppeg'ht'P qpeqpxg{ cpegu'Qpn' "				
3470' Qxgtj gcf'Equu"%htqo 'hpg'627.'RctvG+"				
3480' Wpeqngvgf 'kpgt guv'Cr r tqxgf 'Htdgctcpeg'Ci tgggo gpw'Qpn' +"				
3490' Co qwpv'f wg'htqo 'dw{gt'cv'enqulpi 'qt'cv'crr tckucn'pqveg'f cvg"%htqo 'hpg'628.'RctvG+"				
34: 0' Co qwpv'qy gf 'q'dw{gt'cv'enqulpi 'qt'cv'crr tckucn'pqveg'f cvg"%htqo 'hpg'629.'RctvG+"				
Ugg'kpuw vevkpu"				
34: 0' Cff kskpcn'enqulpi 'equu"%htqo 'hpg'62: .'RctvG+"				
3520' Crr tckucn'Hgg"%htqo 'hpg'62: .'RctvG+"				
3530' Fghlekpe{ 'Lwf i o gpv'Equu'Heggu"%htqo 'hpg'632.'RctvG+"				
3540'				
3550'Eqpvcev'P co g'cpf 'Vgrrj qp'P wo dgt<J qrf lpi 'O qti ci gg"	Vqvcni'3560' &	3570' &	3580' &	"

Eqpvcev'P co g'cpf 'Vgrrj qp'P wo dgt<Ugtxlelpi 'O qti ci gg"	3590'P gv'Ercko "Co qwpv'" %eqnwo pu"D"/"C"- 'E+'""&"
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Certification: The undersigned certifies that the amounts listed above represent all the expenses actually paid by on or behalf of the mortgagee in connection with the foreclosure, acquisition, conveyance, assignment operation, protection, or preservation of the property identified by the above FHA case number and that the information shown above is true and correct, and the undersigned agrees that upon request of HUD it will furnish receipted invoices for any amounts shown above. **I/We**, the undersigned, certify under penalty of perjury that the information provided above is true 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)

138. Mortgagee official signature, date and title (Signature not necessary if signed by the Servicer)	139. Servicer Signature, date and title "
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Single-Family Application
for Insurance Benefits

Part C Support Document

200. Mortgagor's or HECM Borrower's Name and Property Address	201. FHA Case Number	202. Section of Act Code
	203. Mortgagee's reference number (max. 15 digits)	
	204. Date	205. Debenture interest rate

Disbursements for Protection and Preservation (Continues on back)

Date Paid	Date Work Completed	Description of Service Performed	Amount Paid \$	Debenture Interest \$
206.				
207.				
208.				
209.				
210.				
211.				
212.				
213.				
214.				
215.				
216.				
217.				
218.				
219.				
220.				
221.				
222.				
223.				
224.				
225.				
226.				
227.				
228.				
229.				
230.				
231.				
232.				
233.				
234.				
235.				
236.				
237.				
263. Subtotals brought forward from line 262 on back				
264. Enter amount paid and interest (Enter also on line 110, Part B)			Totals	

265. Holding Mortgagee Contact Name and Telephone Number:	266. Servicing Mortgagee Contact Name and Telephone Number:
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Certification: The undersigned certifies that the amounts listed above represent all the expenses actually paid by on or behalf of the mortgagee in connection with the foreclosure, acquisition, conveyance, assignment operation, protection, or preservation of the property identified by the above FHA case number and that the information shown above is true and correct, and the undersigned agrees that upon request of HUD it will furnish receipted invoices for any amounts shown above. **I/We**, the undersigned, certify under penalty of perjury that the information provided above is true 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)

267. Mortgagee official signature, date and title. (Signature not necessary if signed by Servicer)	268. Servicer Signature, date and title
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Single-Family Application
for Insurance Benefits
Part C continuation

Disbursements for Protection and Preservation				
Date Paid	Date Work Completed	Description of Service Performed	Amount Paid \$	Debenture Interest \$
238.				
239.				
240.				
241.				
242.				
243.				
244.				
245.				
246.				
247.				
248.				
249.				
250.				
251.				
252.				
253.				
254.				
255.				
256.				
257.				
258.				
259.				
260.				
261.				
262. Subtotals (bring forward to line 263 on front				
Mortgagee's comments, if any				

HUD's comments, if any

Part D Support Document (Continuation 1)

305. Disbursements for HIP, taxes, ground rents and water rates (which were liens prior to mortgage), eviction costs and other disbursements not shown elsewhere. (Do not include penalties for late payment.) Only costs incurred between the dates in Items 8 and 10 of Part A are allowed.

308. Taxes on Deed					
Date Paid	Type	to Mortgagee	to HUD	Amount Paid	Debt Interest
	State				
	Other				
	Enter on Line 117, Part B			Totals \$	

311. Mortgage Insurance Premiums							
Date Paid	Period Covered From To	Amount Paid	Debt Interest	Date Paid	Period Covered From To	Amount Paid	Debt Interest
Enter on Line 122, Part B						Totals	\$

Please see HUD Handbook 4000.1, FHA Single Family Housing Policy Handbook for submission instructions for forward mortgages.

Single-Family Application
for Insurance Benefits

Part E Support Document (Continuation 2)
Use this form when filing for Coinsurance or Nonconveyances

400. FHA Case Number | 401. Section of Act Code | 402. Mortgagee's reference number (max. 15 digits) | 403. Debenture Interest Rate | 404. Date

405. Overhead Costs
One Time Charge (not to exceed \$40) \$
No. of Months x amount \$ =
Enter on Line 125, Part B Total \$

409. Appraisal Fee
Enter on Line 130, Part B Total \$

406. Amounts due from buyer at closing or at appraisal notice date for:
Taxes \$
Water rates
Special Assessments
Enter on Line 127, Part B Total \$

410. Deficiency Judgment Costs/Fees
Enter on Line 131, Part B Total \$

407. Amounts owed to buyer at closing or at appraisal notice date for:
Taxes \$
Water rates
Special Assessments
Enter on Line 128, Part B Total \$

411. Reserved
Total \$

408. Additional closing costs at settlement
Discount Points on FHA/VA Financing \$
Sales Commission
Recording Fees
Servicing Charge
Termite Report
Title Insurance
Appraisal
Enter on Line 129, Part B Total \$

412. Reserved
Total \$