

Hazard Loss Disbursement Request



Seller/Servicer Name	Seller/Servicer Number
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Loan Data

Held for investment
 Held for securitization K-Deal #
 Held for securitization SBL #

Check all that apply:

Cash
 Tax-Exempt Bond
 Structured Transaction
 Seniors Housing
 Bond
 LIHTC/Section 8
 Credit Facility
 Unstabilized/Rehab/Lease-Up

Property Name Borrower Name

Guarantor(s)

	First Loan	Second Loan	Third Loan
Freddie Mac Loan No.			
Servicer Loan No.			
Original UPB			
Current UPB			
Date of Origination			
Maturity Date			

Current Risk Rating:

If Current Risk Rating is greater than six, explain:

Attachments
Attach the following required items for each release:

- Updated Form 1140 Part II to include disbursement and any changes since previous submission
- Invoices for subject draw
- Lien waivers

Attach the following required items as noted:

- Inspection Report (per approved Hazard Loss Notification and Plan - Form 1140)
- Final proof of loss statement (no later than final disbursement)
- Items required by the approved Form 1140:

If relevant and available or required, also attach:

- Certificate of Occupancy
- Other:

Disbursement Information

1. Draw Number

2. Is this disbursement the final release? Yes No

Disbursement Information (continued)

3. Total costs incurred for current draw
- a. Recommended holdback amount for current draw
- b. Recommended disbursement amount
4. Are there disbursement timing issues? If yes, please explain. Yes No

Insurance Information for Repair

1. Total insurance proceeds received to date
2. Total insurance proceeds disbursed to date
3. Available insurance proceeds held by Servicer

Repair of Property

1. Estimated repair completion date
2. Percent of repairs completed to date
3. Describe status of repairs

Sources and Uses of Funds

1. Are there changes in the following items since the submission of the Form 1140 or prior Form 1140-DR? If yes, provide updated amount, as applicable:

- a. Total insurance proceeds expected to be received Yes No TBD
- b. Other potential funding sources, excluding Borrower Yes No TBD
- c. Borrower's total estimated cost to repair property Yes No TBD
- d. Estimated Excess (or Shortfall) Yes No TBD

2. Describe any items checked Yes above

Explanation of Disbursement Request

1. Provide summary of expenses pertaining to this disbursement request (attach extra sheets if needed)

Contractor	Description of Work	Total Cost	Holdback (if any)	Draw Amount	Lien Waiver
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>

Total Disbursement Request:

Explanation of Disbursement Request (continued)

2. Comments relating to chart above, if any

Recommendation

Provide Servicer's recommendation regarding approval of disbursement request, identifying and addressing any concerns.

I certify that the subject work has been inspected and verify that the work has been completed in a workmanlike manner and there are no liens against the property relating to the repair work. I have reviewed the invoices presented and they represent the amount being requested in this draw request. Furthermore, I confirm that the invoices have either been paid or I will ensure that payment is via joint checks to the Borrower and the relevant vendor.

By electronically signing this Form on behalf of my company, I hereby certify and agree that I have confirmed that my company has determined that my Electronic Signature complies with the requirements in Guide Section 2.14, and that my Electronic Signature on this Form shall be as binding, valid and enforceable as my original written signature on a paper original of this Form.

Authorized Signatory

Date

Print Name

Title

Phone Number

Email

Authorized Signatory

Date

Print Name

Title

Phone Number

Email