PRE-FORECLOSURE SALE PROGRAM
CLOSING WORKSHEET\RECAP

HUD Ofc/Coordtr: _____ Date: _____

Control Number: _____ FHA Case Number: _____

Mortgagor Name(s) and Property Address: Mortgagee Name and Address:

_____ _____

_____ _____

Date Enrolled: Outstanding Indebtedness:

____/____/____/ $ _____

Orig'l Appraised Value: $ _____ Date: ____/____/____

No. of Sales Contracts Submitted: _____ Date Contract Approved: _____

Name(s) of Purchaser(s):_____

No. of Liens Satisfied: _____ Amount Paid to Lienholders $ _____

Percentage of "As-Is" Appraised Value	Selling Price	Appraised Value
$_____	$_____	_____%
Name of Broker	Sales Commission/Rate	Broker's Sig. & Date*
_____	$_____/____%	_____

Type of financing: ( ) FHA ( ) VA
[check one] ( ) Conventional ( ) Other
_____

*By signing, the Broker certifies that there are no hidden terms or special understandings with the buyer, seller, or program coordinator.

2

Does selling price exceed appraised value? ( ) yes ( ) no

If yes: $_____ $_____

Excess amount 50% (fifty percent) of excess

INCENTIVES TO BE PAID TO SELLER AT CLOSING:

Base incentive: $_____ = (Enter $1500 or 50% of excess amount, whichever is greater)

Plus additional amounts (if any): $_____

Total Incentives: $_____

_____

Program Coordinator - Date

____

Date of Closing: ____/____/____

TOTAL INCENTIVES PAID: $_____

This certifies that the incentives itemized above were paid to the seller at closing.

_____

Closing Agent - Signature - Date

(Attach copy of Settlement Statement)