

Request For Extension Of Closing Date

Property Address:.....
Street City State Zip Code

FHA Case #:.....

Escrow Number _____
Print Buyer's Name _____
Print Broker Name _____ Broker Phone _____
Broker Email _____ Broker Fax _____

Reason for Extension

Application for mortgage financing on the above referenced property
has been made on: _____
to (mortgage lender): _____

However, closing cannot be accomplished within the originally agreed
upon time frame of: _____days

On behalf of my client(s), I am requesting an extension of the scheduled closing date for 15 days.
Please select the fee appropriate to your contract amount
____ Contract Sales Price equal to or less than \$25,000 Extension fee is \$10 per day = \$150.00
____ Contract Sales Price of \$25,001 to \$50,000 Extension fee is \$15 per day = \$225.00
____ Contract Sales Price over \$50,000 Extension fee is \$25 per day = \$375.00

Enclosed is a certified check or money order in the amount of \$_____ payable to HUD.
I understand that this extension fee is non-refundable but, if closing occurs in less than the approved
extension of time, my client(s) will be credited at closing for the per day fee for the unused portion of time. I
understand that if this request is denied the check or money order will be returned.
The following documentation is attached in support of this request:

- ___ Copy of the sales contract signed by ALL parties, including HMBI, as HUD's Representative.
- ___ Any document provided showing the originally scheduled closing date.
- ___ Copy of the mortgage loan application.
- ___ Notification from the mortgage lender concerning imminent approval of the application.
- ___ Other pertinent documents and information.

Selling Broker's Signature: **Date:**

Print Broker's Name:.....

Company Name:

Company Address:
.....
Street City State Zip Code

(This section to be completed by HMBI as HUD's Representative, and by HUD's Closing Agent.)

Date Request Received By Closing Agent:

Funds in the amount of \$_____ received by:

Original Contract Expiration Date:

New Contract Expiration Date:

Number Of Extensions Previously Approved:

- Extension of 15 days approved. Closing must occur no later than:
- Extension request denied.

HMBI's Signature: **Date:**