

**Excess Funds from  
Redemption of Bonds  
Housing Finance Agency  
Risk-Sharing**

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

OMB Approval No. XXXX-XXXX (Exp. mm/dd)

Public Reporting Burden for this collection of information is estimated to average X.X 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policy and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (XXXX-XXXX), Washington, D.C. 20503. Do not send this completed form to either of these addresses.

**Part I**

Instructions: Any excess funds resulting from the retirement of bonds serving a mortgage must be returned to HUD within 30 calendar days of the payment date the initial claim (24 CFR 268.628(a)(3)).

The funds will be wired to HUD according to the instructions contained in Part 2 of this form.

Complete Part I of this form and send original and two copies to HUD, by overnight delivery, on the same day the funds are wired. Send the form to the following address:

U.S. Department of Housing and Urban Development  
Multifamily Claims Branch, Room 6254  
451 7th Street, SW, Washington, DC 20410-8000

1. FHA Project Number	2. Name and Location of Project	3. Date Prepared
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4. Amount Needed to Retire Bonds	5. Less: Amount of Initial Claim Payment	6. Amount Due HUD
\$	\$	\$

To the best of my knowledge, all the information stated herein, as well as all information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

7. HFA Name, Address and Zip	8. Title and Signature of HFA Official
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9. Tax Identification Number	10. Telephone Number
	( )

**Part II**

**Instructions for Completing a Request to Transfer Funds by Wire**

**Wire Transfer Deposit Message Format**

- (1) 021030004 (2)
- (3) (4) (5)
- (6)
- (7) (8)
- TREAS NYC/CTR
- (9) (10)

BNF=/AC-86090300 OBI=RishareBondRedExcess

FHA Project No. Account 86X4070

Remitter

Important: Items 1, 7, 8, 9 and 10 must be completed as shown above. A separate wire transfer must be made for each project.

- Item 01 Receiver DFI#: The Treasury Department's ABA number for deposit messages is 021030004. This number should be entered by the sending bank for all deposit messages sent to the Treasury.
- Item 02 Type-Subtype-CD: The type and subtype code will be provided by the sending bank.
- Item 03 Sender-DFI#: This number will be provided by the sending bank.
- Item 04 Sending-REF#: The sixteen character reference number is inserted by the sending bank at its option.
- Item 05 Amount: The transfer amount must be punctuated with commas and decimal points; use of the \$ is optional. This item will be provided by the depositor.

- Item 06 Sender-DFI-Name: This information is automatically inserted by FRB.
- Item 07 Receiver-DFI-Name: The Treasury Department's name for deposit messages is "TREAS NYC". This name should be entered by the sending bank.
- Item 08 Product Code: A product code of "CTR" for customer transfer should be the first data in the Receiver - Text field. Other values may be entered, if appropriate, using the ABA's options. A slash (/) must be entered after the product code.
- Item 09 Agency Location Code: This item is of critical importance. It must appear on the funds transfer deposit message in the precise manner as stated to allow for the automated processing and classification of the funds transfer message to the agency location code of the appropriate agency. The agency's unique code must be specified in the funds transfer message in order for the funds to be correctly classified to the respective agency. The tag BNF=, and identifier code, "/AC-", follow by the appropriate ALC number. This component must be in the following format:

BNF=/AC-86090300

The ALC identification sequence can, if necessary, begin on one line and end on the next line; however, the field tag "BNF=" must be one line and cannot contain any spaces.

- Item 10 Third Party Information: This contains the appropriate information to identify the reason for the funds transfer. The Originator to Beneficiary Information field tag "OBI=" is used to signify the beginning of the free form third party text. The field tag "OBI=" must be on the same line and cannot contain any spaces. The field tag is placed following the ALC identification sequence and preceded by a space.