

Illinois Housing Development Authority Release of Recapture Agreement/Mortgage/Regulatory and Land Use Restriction Agreement Request Form

When requesting a release from IHDA please provide the following information:

Date of Request:	
Reason for Release:	 The recapture period is complete. I am refinancing but I am not sure if the recapture period is complete. The owner/applicant on the original document is deceased.
Borrower Name:	
Property Address:	
Loan Number:	
Address to mail Origi	nal Release for Recording:
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Requestor Inform	nation:
Requested by:	Title:
Phone Number:	Email:
Housing Developm	opy of Title Commitment showing the lien on the property by the Illinois ent Authority, legal description, and property address or a copy of the ts requiring release.
-	ve information is true and correct to the best of my knowledge. I also certify that I am or that I am authorized to make this request on behalf of the owner/borrower.
Signature:	Date:
This form, along with LPMRelease@ihda.or	any supporting documentation should be emailed to
Δ release and/or a re	snonse explaining why a release cannot be provided will be prepared and mailed or

emailed as requested with in 7 to 10 business days.