

## MHDC SURVEYOR'S REPORT

### Owner's Representative/Contact:

Name & Phone No. \_\_\_\_\_

Address: \_\_\_\_\_

### MHDC Surveyor's Report Certification

I certify that, on *(date of survey – must be same as initial site visit)* \_\_\_\_\_, I made a survey of the premises standing in the name of *(owner at time of survey)* \_\_\_\_\_

\_\_\_\_\_ situated in *(city, county, state)*:

\_\_\_\_\_ known as street numbers \_\_\_\_\_ and shown on the accompanying survey entitled: \_\_\_\_\_.

I made a careful inspection of said premises and of the buildings located thereon at the time of making such survey, and again, on *(date of last inspection – must be within 90 days of closing)* \_\_\_\_\_, and on such

latter inspection, I found said premises to be standing in the name of *(owner name – not project name)*:

\_\_\_\_\_.

In my professional opinion, the following information reflects the conditions observed on the date of the last site inspection or disclosed in the process of researching title to the premises, and I further certify that such conditions are shown on the survey map/plat dated \_\_\_\_\_ or has/have been updated thereon under Revision Date *(within 90 days of closing)*

\_\_\_\_\_.

*For items 1 through 10, please provide a detailed answer or state "none" if inapplicable. Positive statements are required regarding Items 1 through 10 on the Surveyor's Report. Statements such as the following are not positive statements:*

- (a) "Shown on the survey" – If nothing is shown on the survey, then a positive statement has not been made.*
- (b) "None known" – This is not a positive statement, and is obvious the surveyor has not checked the records or made a transit survey.*

*Examples of acceptable statements are:*

*"Yes, as shown on survey."*

*"None."*

*Note: For items 3, 6 and 10 on the Surveyor's Report, a representation of "none observed" will be accepted.*

1. Rights of way, old highways or abandoned roads, lanes or driveways, drains,

sewer or water pipes over and across said premises:

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2. Springs, streams, rivers, ponds or lakes located, bordering on or running through said premises:

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3. Cemeteries or family burying grounds located on said premises:

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4. Electricity, or electromagnetic/communications signal, towers, antenna, lines, or line supports located on, overhanging or crossing said premises:

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Disputed boundaries or encroachments. *(If the buildings, projections or cornices thereof or signs affixed thereto, fences or other indications of occupancy encroach upon adjoining properties or the like encroach upon surveyed premises, specify all such):*

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6. Earth moving work, building construction, or building additions within recent months:

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7. Building or possession lines. *(In case of a city or town property specify definitely as to whether or not walls are independent walls or party walls and as to all easements of support or "Beam Rights." In case of a country property report specify how boundary lines are evidenced, that is, whether by fences or otherwise):*

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8. Recent street or sidewalk construction and/or any change in street lines either

completed or proposed by and available from the controlling jurisdiction:

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9. Flood hazard:

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10. Site used as a solid waste dump, sump, or sanitary landfill:

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Further, I hereby certify to the Missouri Housing Development Commission (“MHDC”), that:

I made an on the ground survey per record description of the land shown on the Survey No. \_\_\_\_\_, last revision dated \_\_\_\_\_ (“Survey”) located in (*city or town, county, township, etc.*), and that it was made in accordance with MHDC’s Instructions and Surveyor’s Report, and the requirements for an ALTA/NSPS Land Title Survey, as defined in the 2021 Minimum Standard Detail Requirements for ALTA/NSPS Land Title Surveys.

To the best of my knowledge, belief and information, except as shown on the Survey: there are no encroachments across any property lines; title lines and lines of actual possession are the same; and the premises are [*not subject to a*] [*subject to a*] 100/500 year return frequency flood hazard, and such condition is shown on Federal Flood Insurance Rate Map, Community Panel No. \_\_\_\_\_ (*please add “none,” if inapplicable*).

Surveyor’s Name (print or type):	License Number and Seal:	Signature:   Date:
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