

TO: HHFDC (Hawaii Housing Finance and Development Corporation)
ATTN: REAL ESTATE SERVICES SECTION
677 QUEEN STREET, SUITE 300
HONOLULU HI 96813
VIA FAX #587-0600

RE: Project Name*: _____ Unit/Lot No. _____
(*For a list of Projects developed or sponsored by HHFDC, refer to HHFDC's website at <http://dbedt.hawaii.gov/hhfdc/fag/>. Click on the "HHFDC Sponsored Affordable Developments" link.)

Property Address: _____
Owner Name (List All Owners of Record): _____

PLEASE PROVIDE INFORMATION FOR THE FOLLOWING ACTIVITY CHECKED BELOW, ON BEHALF OF THE OWNER OF THE ABOVE REFERENCED PROPERTY.

- Consent to mortgage refinance. (Complete the Lender's information below.)
- Owner intends to pay HHFDC's Shared Appreciation Equity (SAE).
- Owner intends to sell the above referenced property.
- Property transfer into/out of a Revocable Living Trust.
- Change of title to the property (i.e. add or remove from title)
- Lease related information (i.e. copy of lease document) – specify. _____

- Other – please specify _____

I UNDERSTAND AND AGREE THAT THE REQUESTED GUIDELINES INFORMATION WILL BE PROVIDED **BY FAX AND/OR MAIL** TO THE PERSON LISTED BELOW WHO IS AUTHORIZED, BY THE ABOVE NAMED OWNER TO SUBMIT THIS REQUEST TO HHFDC.

NAME OF REQUESTOR: _____

RELATIONSHIP TO OWNER: _____

COMPANY NAME, if applicable: _____

ADDRESS: _____

TEL. NO.: _____ FAX NO.: _____

Print Name _____ Signature _____ Date _____

Print Name _____ Signature _____ Date _____