

TO: Hawaii Housing Finance and Development Corporation (HHFDC)
ATTN: REAL ESTATE SERVICES SECTION
677 QUEEN STREET, SUITE 300
HONOLULU HI 96813
VIA FAX #587-0600 or
EMAIL: hfhdc.res.info@hawaii.gov

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/hfhdc/fag/>. Click on the "HHFDC Sponsored Affordable Developments" link.)

Property Address: _____

Owner Name (List All Owners of Record): _____

Owner or Owner's authorized representative listed below is requesting information regarding the intended activity as checked, for the above referenced property. Information for the following activity will be sent to the person named below by FAX, MAIL or EMAIL.

- 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 _____

If requested by the HHFDC, the undersigned requestor, if not the owner, shall provide a copy of the owner's written authorization (i.e. borrower authorization, listing agreement, etc.) to obtain the requested information.

NAME OF REQUESTOR: _____

RELATIONSHIP TO OWNER: _____

COMPANY NAME, if applicable: _____

ADDRESS: _____

TEL. NO.: _____ FAX NO.: _____ EMAIL: _____

Print Name Signature Date

Print Name Signature Date

FOR HHFDC USE ONLY. REQUEST EMAIL DATE:

HHFDC RECT/PROCESS DATE: _____

ASSIGNED STAFF/DATE: _____

INITIAL LETTER DATE: _____