INTAKE FORM FOR HHFDC INFORMATION for Properties subject to Buyback &/or SAE programs

Complete all information as applicable, sign then send to HHFDC. Email is preferred.

FOR HHFDC USE ONLY
eRecd Date:
Assigned Staff:
Date Assigned:
Date File Pulled By:
Type Activity: & Program:
Staff Start Date:

SEND TO: HHFDC – ATTN: RESS*

By Mail: 677 QUEEN STREET #300
HONOLULU HI 96813

By Fax#: (808) 587-0600; **or**

Email: HHFDC.RES.INFO@HAWAII.GOV

Project Name: _____

_____

Unit or Lot No.: _____

Property Address: _____

_____

From: Owner Name (List All Owners of record), or Owner's Agent:**

_____

Best Tel No.: _____ Best Email: _____

****Owner's Agent or Representative, if any:** _____

Agent Company Name & Address _____

Best Tel#: _____ Email: _____

READ CAREFULLY. The Owner or Owner's Agent named herein, requests information for the following activity checked below for the property listed above.

☐ **Consent to Mortgage.** Lender to attach borrower's signed authorization. *Includes refinancing, equity line of credit (HELOC), and loan modification.

☐ **SAE (Shared Appreciation Equity) Payoff.**

☐ **Transfer of title/ownership**
*includes transfer to/from owner's trust, change to title (add or remove), or re-sale.

☐ **Owner intent to sell.** (Attach seller's signed listing agreement. If none, OK to submit Form without.)

☐ **Other:** Explain or describe below.

☐ **Copy of Deed document, as amended**
*Available for 25 cents per page, payable in advance. HHFDC will provide the following upon receipt of payment.

- Original Deed, typically 40-pgs.
- Memorandum of Use, Sales &Transfer, 3-pgs.
- Memorandum of SAE, 3-pgs.
- Current Deed, if applicable, est. 35 pgs.
- Upon receipt of your request, staff will determine the number of pages & send a bill for collection for payment by check. Electronic payment not available or allowed.

☐ **Capital Improvements.**
* Such as alteration, addition or replacement.

I/WE, the undersigned, UNDERSTAND AND AGREE that the requested information will be provided by **MAIL, FAX AND/OR EMAIL *after* review of the property file. Allow a minimum of 10-business days for an initial response.** The undersigned is the owner, or owner's agent authorized to submit this request on behalf of owner. Requested information will be sent to the Owner/Owner's Agent named above, if deemed to be acceptable for processing by the HHFDC. **IMPORTANT: If this form is not signed by the owner(s), attach owner's signed authorization form/letter.**

PRINT - OWNER NAME	SIGNATURE	DATE
PRINT – OWNER NAME	SIGNATURE	DATE
PRINT – **AGENT NAME, *if applicable***	AGENT SIGNATURE**, as applicable**	DATE

* **HHFDC is the Hawaii Housing Finance & Development Corporation** and successor to the Housing and Community Development Corporation of Hawaii (HCDCH) and the Housing Finance and Development Corporation (HFDC) and formerly a part of the Hawaii Housing Authority**. RESS is the HHFDC's Real Estate Services Section** responsible for managing the buyback, SAE, and deferred sales price programs.