

**Residual Receipts Request**

**Project Name:** \_\_\_\_\_

**Address of Project:** \_\_\_\_\_

**CHFA Loan Number:** \_\_\_\_\_ **FHA Number:** \_\_\_\_\_

**Wells Fargo Account Number:** \_\_\_\_\_

**Management Agent (Contact):** \_\_\_\_\_

**Management Agent (Contact):** \_\_\_\_\_

Is any documentation more than one year old? **Yes**  **No**

If yes, justification of age of documentation: \_\_\_\_\_

\_\_\_\_\_

Are there any unresolved Management Review findings? **Yes**  **No**

Has annual audit been submitted for most recent fiscal year end? **Yes**  **No**

Are there any unresolved audit findings? **Yes**  **No**

Have the required CHFA reports and fees (if applicable) been submitted? **Yes**  **No**

Amount of Funds Requested from Residual Receipts Account: \$ \_\_\_\_\_

**Signature of Requestor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Reviewed by CHFA Officer: Approval** \_\_\_\_\_ **Disapproval** \_\_\_\_\_

**Reason for Disapproval** \_\_\_\_\_

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