

## cash collateral support application extend and/or modify a deposit agreement

Please submit completed Application to the CHFA Community Development Division at least 15 days prior to expiration of the deposit agreement in effect Applications are typically reviewed within three days of receipt.

lender information					
Lender/Bank Name					
Contact Person					
Branch Location (address, city)					
Telephone Number			Lender/Bank Tax ID Number		
project information					
Borrower Name					
Borrower Contact Person					
Borrower Location (address, city)					
Lender Loan Number			Loan Closing/Origination Date		
CHFA Deposit Agreement Effective Date		Initial Term of Deposit Agreement			
Loan Status		☐ 1 Year ☐ 2 Years ☐ 3 Years ☐ Other: (explain):  Principal Balance (as of date of this form)			
☐ Performing ☐ Default: (explain)			\$		
collateral information					
Collateral Information					
description of available collateral estimated market value		*	lender's Itv limit**	loan/credit limit	
	\$			\$	
	\$			\$	
	\$			\$	
cash collateral support***	\$		100%	\$	
total collateral \$			10070	\$	
*Estimated Market Value – In general, lender may follow its internal policies and guidelines to determine the estimated market value. In the section below, lender must explain its internal process for determining the value. Lender Narrative:					
**Lender's LTV Limit – This figure should match the lender's original CCS application.  ***Cash Collateral Support – This is the amount of CCS funds the lender is requesting to hold as collateral.					
lender narrative					
Please explain the lender request to extend and/or modify the Deposit Agreement:					
Reason for Request					
Justification for Request, including when the lender reasonably expects CCS funds to be released to CHFA					
lender signature					
Signature				Date	
Print Name and Title					