



Please complete and submit with required documentation to TPOscenario@citylendinginc.com
Please allow at least 2 full business days for review and approval.

Date of Submission:

Name of Program:

Type of Funding: \_\_\_ Gift or Grant with no repayment
\_\_\_ Secondary Financing which may or may not require repayment

Provider:

Type of Provider: \_\_\_ Agency or municipality of federal, state, local or municipal government
\_\_\_ Nonprofit organization
\_\_\_ Religious organization other than a credit union
\_\_\_ Borrower's Employer
\_\_\_ Regional Federal Home Loan Bank Affordable Housing Program

Check below to indicate the type of review needed:

\_\_\_ Loan Level Approval (Provider/Program is in current approved status on City Lending Inc. DPA/Secondary financing provider list)

Table with 2 columns: Borrower Last Name, CLI Loan Number; Estimated Closing Date, Loan Program; CLI Client Contact; \_\_\_ Copy of borrower's approval from the funding provider is attached

\_\_\_ Full Program Review and Approval (Provider/Program is not currently listed on City Lending Inc DPA/Secondary Financing provider list or is listed in expired status).

The following documentation required for full review is included:

- \_\_\_ Program contact name, phone number, email address (if available), and website information for access to program guidelines
\_\_\_ Copy of complete program guidelines
\_\_\_ Example subordinate mortgage/deed of trust (if funds result in a second lien)
\_\_\_ Example subordinate note (if funds result in a second lien)
\_\_\_ Agency HUD Approval Letter for providing secondary financing (if funds result in a second lien)
\_\_\_ 501c3 letter confirming nonprofit status (if provider or administrator of funding is a nonprofit organization)

Table with 3 columns: Received Date, Review Status, Decision Date; Reviewed By; Comments

