



FHLBank
Chicago

Affordable Housing Program Project Change Form

Date: _____

Project #: _____ Project Name: _____

Member Institution: _____ Sponsor Organization: _____

Member Contact: _____ Sponsor Contact: _____

Phone: _____ Phone: _____

Email: _____ Email: _____

Are you requesting a Member Bank or Sponsor Organization change?

Yes ☐ No ☐ New Entity: _____

Type of Project Change:

Modification to Commitments detail, if applicable:

Project Information Update

Targeting

Modification to Commitment(s)

Number of Units

Increase in AHP Subsidy

Services and Activities

Eligibility Modification

Other Scoring :

Other:

Provide detailed description of project change / information update and reason for the request:

Is this requested project change in connection with a disbursement request?

Yes ☐ No ☐

Will the project continue to meet the AHP eligibility requirements?

Yes ☐ No ☐

Will the project continue to meet the AHP feasibility requirements?

Yes ☐ No ☐

Is this project currently compliant with the commitments made in the AHP application?

Yes ☐ No ☐

If this is a modification request, demonstrate good cause for the modification. Some examples of good cause are:

- Benefits to population served and project, if modification is allowed
- Financial distress can be relieved or avoided
- Legal or regulatory limitations
- Alternatives to a modification are detrimental or lead to loss
- Changes to local market conditions

Could the project cure rather than modify the project given more time? Please explain.

Describe if and what alternative approaches were explored before submitting a modification request.

By signing below, I certify that I am duly authorized to make the representations contained herein, and the information provided is true, complete, and accurate. I have attached supporting documentation for the good cause (if available and applicable).

By: _____ Date: _____

Member Contact Signature

Print Name: _____ Title: _____

By: _____ Date: _____

Sponsor Contact Signature

Print Name: _____ Title: _____

This form and any supporting documentation should be returned to AHP@fhlbc.com. If you have any questions, contact Community Investment at (312) 565-5824.

Please refer to the FHLBC Project Change and Non-Compliance Policy located on www.FHLBC.com for information on what type of Project Change you are requesting and if it triggers an Event of Non-Compliance.