MOHCD AND FORMER SFRA/OCII PROPERTIES – SUBORDINATION REQUEST CHECKLIST

A checklist MUST accompany each subordination package. Please allow 7-10 business days for processing COMPLETE subordination requests. We only accept subordination requests from participating lending officers or agents. For a complete list, please go to: http://sfmohcd.org/mochd-authorized-lender-list

BORROWER					
Borrower1 Name:		Address:			
Borrower2 Name:		Email:		Phone #:	
ESCROW					
Escrow Officer:		Escrow #:			
Phone #:		Email:			
LENDER					
Loan Officer:		Email:		Phone #:	

Which program(s) are you requesting a subordination for?

❑ BMR ❑ DALP ❑ BMR-DALP ❑ BMR-DALP Plus ❑ CalHome ❑ CHRP ❑ Rehab
❑ Lead ❑ TND ❑ PIC ❑ FRDALP ❑ City2nd ❑ SFRA ❑ ADDI

REQUIRED DOCUMENTS *(Check the box for YES)*	***For MOHCD Use Only***		
	Submitted	**Missing**	**Incomplete**
❑ Are you an approved Participating Lending Officer for the program(s) above?			
❑ Administrative Fee (escrow/cashier check, see website for the current fee)			
❑ Subordination Request to MOHCD from Owner (see enclosed request letter)			
❑ Copy of Recorded MOHCD and/or SFRA Deed of Trust			
❑ Preliminary Title Report (within 90 days)			
❑ Commitment Letter			
❑ Current Mortgage Statement of Existing First Mortgage			
❑ Payoff Demand of Existing First Mortgage: **Include:** ❑ Current Interest Rate: ❑ Current Term of the Loan:			
❑ Current Appraisal Report (within 90 days)			
❑ Loan Estimate or Estimated Settlement Statement			
❑ Completed and Signed Form 1003: **(Loan Originator MUST be a participating loan officer)**			
❑ Completed Form 1008			
❑ Optional: FedEx / UPS Return Label and Envelope			

Please submit the completed subordination package: ELECTRONICALLY through the Database of Affordable Housing Listings, Information, and Applications (DAHLIA) System.

Please submit the Admin Fee to: Mayor's Office of Housing and Community Development, 1 South Van Ness Ave., 5th Floor, San Francisco, CA 94103. Attention: Subordination Unit

9/2016

SUBRDINATION REQUEST TO MOHCD

Date_____

Attention Loan Servicing
Mayor's Office of Housing and Community Development (MOHCD)
1 South Van Ness Ave., 5th Floor
San Francisco, CA 94103

Homeowner Name(s): _____
Address: _____

To the Mayor's Office of Housing and Community Development,

I/We are working to refinance our current first mortgage loan. I/We are pursuing this refinance because: (please explain why you are wishing to refinance at this point and time)

☐ Rate Reduction
☐ Decreased Monthly Mortgage Payment
☐ Refi Amount is less than existing loan
☐ Loan Term Reduced
☐ Cash-out Amount
☐ Other:

I/We are working the following lender to refinance our loan and grant this person permission to release and exchange information with MOHCD regarding this transaction.

Name of Lender	Bank Name	Email Address	Phone #

Additionally, below is a list of all household members on title and/or on the loan as well as their contact information should you have any questions.

Name	On Title? (Y/N)	On Loan? (Y/N)	Email Address	Cell Number

Sincerely,

_____
Homeowners Signature(s)
(If more than one homeowner – all members on title and loan must sign)