



### AFFORDABLE HOUSING PROGRAM ("AHP") GENERAL FUND MILESTONE EXTENSION REQUEST FORM

PROJECT NAME: \_\_\_\_\_ PROJECT # (FHFA ID): \_\_\_\_\_

SPONSOR: \_\_\_\_\_ MEMBER: \_\_\_\_\_

Milestone Report Extension Requested: \_\_\_\_\_

**Project's Current Status.** Provide an explanation of factors causing the delay in satisfying the Milestone Requirement(s). Summarize the actions the sponsor and project team are taking to ensure the Milestone Requirement(s) will be satisfied in a timely manner.

Anticipated Date to Remediate Milestone Requirement(s): \_\_\_\_\_

**PROVIDE AN UPDATE TO THE FOLLOWING PROJECT SCHEDULE DATES:**

|  |  |
|--|--|
| Site Control Secured:                        |  |
| Funding Sources Secured:                     |  |
| Commencement of Construction/Rehabilitation: |  |
| Commencement of the AHP Drawdown Process:    |  |
| AHP Subsidy Fully Funded:                    |  |
| Completion of Construction/Rehabilitation:   |  |
| 80% Occupancy Achieved:                      |  |

**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.**

|  |  |
|--|--|
| <p><b>Sponsor Contact Name:</b> _____</p> <p><b>Title:</b> _____</p> | <p>By checking this box, I agree that I signed this form with an electronic signature. I intend my electronic signature to have the same force and effect as my manual signature.</p> <p><b>Sponsor Signature:</b> _____</p> <p><b>Date:</b> _____</p> |
|--|--|

|   |   |
|---|---|
| <p><b>Member Contact Name:</b> _____</p> <p><b>Title:</b> _____</p> | <p>By checking this box, I agree that I signed this form with an electronic signature. I intend my electronic signature to have the same force and effect as my manual signature.</p> <p><b>Member Signature:</b> _____</p> <p><b>Date:</b> _____</p> |
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**THIS FORM AND ANY SUPPORTING DOCUMENTATION SHOULD BE SUBMITTED TO THE FHLB NY. MILESTONE EXTENSIONS SHALL BE GRANTED SOLELY AT THE DISCRETION OF THE FHLB NY.**