



FEDERAL HOME LOAN BANK OF DALLAS

homebuyer equity leverage partnership (HELP)



Member Enrollment Application



HELP Member Enrollment Application

This HELP Member Enrollment Application must be completed in its entirety for a member to be eligible to participate in the Homebuyer Equity Leverage Partnership Program (“HELP”).

Member Institution

Name: _____ FHFA ID #: _____ Date _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Primary Contact: _____ Title: _____

Phone: (_____) _____ Fax: (_____) _____ E-mail: _____

Member Certification

As a duly authorized officer or employee of the Member Institution, I certify to the Federal Home Loan Bank of Dallas (the “Bank”) that the information in this HELP Member Enrollment Application is correct and complete. I further certify that Member Institution will use any Homebuyer Equity Leverage Partnership Program (“HELP”) grants received in accordance with the terms and conditions of (i) the Homebuyer Equity Leverage Partnership Program Agreement (the “HELP Agreement”), (ii) the Federal Home Loan Bank Act (12 U.S.C. § 1421 et seq.), (iii) the AHP regulations of the Federal Housing Finance Agency (12 C.F.R. part 1291), (iv) the Bank’s Affordable Housing Program Implementation Plan, (v) any request submitted by Member Institution for a HELP grant and (vi) any other documents published by the Bank or the Federal Housing Finance Agency relating to the HELP program and any document submitted to the Bank by Member Institution relating to the HELP program.

I agree that Member Institution will enter into the HELP Agreement with the Bank and that Member Institution will submit any reports, certifications and supporting documents that the Bank may require.

(Authorized Signature*)

(Title)

(Typed Name)

(Date Signed)

**Individual must be a person shown on the current advances signature card of Member Institution on file with the Federal Home Loan Bank of Dallas or must otherwise be approved by Member Institution and accepted by the Federal Home Loan Bank of Dallas to submit this HELP Member Enrollment Application.*