REQUEST FOR HOLD ON / RE-ACTIVATE ON / REMOVE FROM ACTIVE LIST (RHAL FORM)

MEMBER'S NAME:_____ SPOUSE'S NAME:_____

MEMBERSHIP NUMBER (listed on your statements):_____SOCIAL SECURITY NUMBER:_____

ADDRESS: _____

PHONE: (home)_____ (work)_____ FAX:_____

E-MAIL: (home)_____ (work)_____ CELL:_____

I would like my name to be (*circle one*): **ON HOLD on AL** **RE-ACTIVE on AL** **REMOVED from AL**

Complete the **RFAL** Section below **only** if you are requesting to become "**RE-ACTIVE on AL**" (you are presently on **HOLD on Active List**).

RFAL SECTION

TYPE OF INVESTMENT (*circle one*): NEW REFINANCING MORTGAGE REMODELING OTHER

Maximum AMOUNT REQUESTED FROM Ameen Housing Co-op : US$ _____ This amount will determine your Down-Payment.

Anticipated DATE FOR INVESTMENT: _____/_____/_____ *Estimated* DURATION: _____ YEARS

If NEW INVESTMENT:

YOUR *Estimated* INVESTMENT IN HOME: US$ _____

Estimated PRICE RANGE FOR HOME, BETWEEN US$ _____ & US$ _____

Desired LOCATION OF HOME (COUNTIES) ***** :_____

If REFINANCING MORTGAGE or REMODELING: (These processes are slightly different from regular funding process.)

LOCATION OF YOUR HOME *****: _____ YOUR CURRENT EQUITY IN HOME: US$ _____

CURRENT LENDER(S) (optional) :_____ TOTAL AMOUNT CURRENTLY OWED ON HOME US$ _____

YOUR HOME'S VALUE ******: US$ _____ DATE OF OLD APPRAISAL (optional) ******: _____/_____/_____

Member AHC account balance MUST be GREATER than US$50,000.00 at ALL TIMES to REMAIN on the Active List.

Please acknowledge the following statements by signing below:

1. The **minimum time period** for "**HOLD**" (QUALIFIED or UNQUALIFIED) is **45 days**. You will **NOT** be eligible to be "**RE-ACTIVE on AL**" for at least for 45 days after your "**HOLD Date**". "HOLD Date" is the date your RHAL or notification to be placed on "HOLD" was received by AHC.
2. If at this time, you are requesting to put your name on "HOLD" you **will have to complete and submit a new** RHAL Form requesting to be "**RE-ACTIVE on AL**" at least **6 months PRIOR** to the date you **want** AHC Investment.
3. If you are requesting to be "**RE-ACTIVE on AL**" you **must** include **additional deposit** (if your account does not have the full Down Payment) **with this RHAL Form.** AHC will **NOT** make your status "**RE-ACTIVE**" till your new and duly completed RHAL Form **and** additional deposit is received.
4. If you withdraw funds from AHC (while your name is on "HOLD") and the balance falls below the threshold, you could lose your position on the AL.
5. The maximum AHC Investment Portion specified by the **Regulations** of the Co-operative is currently **US$ 500,000.00**
6. As per the **Regulations** of the Co-operative: "Members are **NOT** allowed to rent, lease or sublet all or part of the housing unit."
7. ***** AHC currently funds properties in **CALIFORNIA ONLY**. For more information, review AHC's By-Laws and the Regulations.
8. ****** AHC will be scheduling an appraisal of your home **prior** to approving funds.
9. The completion and submission of this form should **NOT** be construed as a guarantee of approval for an AHC Investment.
10. The completed and signed RHAL Form should be delivered either in person or mailed to the following address:

ATTN: Member Services / RFAL
Ameen Housing Cooperative
2084 Walsh Avenue, Suite B1
Santa Clara, CA 95050

I/WE HAVE READ THE REGULATIONS & BY-LAWS OF AHC, I/WE UNDERSTAND THEM AND AGREE TO FULLY ABIDE BY THEM.

_____/___/_____ _____/___/_____
Signature(s) of Member Date Signature of Spouse Date

AHC use below this line

Date Received by Ameen: _____ Date Reviewed at Ameen Board Mtg.: _____ Date Approved / Denied: _____

Special Notes:_____

_____

_____

Date Member Notified of Board decision by Status Letter: _____ Active List "Keepers" Signature and date: _____