

## **Hundred Homes Initiative Sponsor Capacity Form**



(This form must be submitted at least two business days before submission of a Reservation Request.)				
Spons	or Organization Name:			
Spons	or Contact Name:	Title:		
Mailir	g Address:			
Phone	number:	Email Address:		
Please exper		equested below and include sufficient detail to demonstrate y	our qualifications and	
		tion's "IRS Documentation of Status" letter. The letter should re is application and should not have expired.	efer to the organization	
2. Id	entify the FHLB Member wi	th which you will be partnering. Include the contact person's na	me and email address.	
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3. D	escribe how you will identify	and verify income eligible households.		

4.	Describe what documentation you will collect to verify the household resides in a pre- June 15, 1976 mob	ile home.
5.	Briefly describe your relevant experience in destructing and/or decommissioning mobile homes. Include of number of jobs you have completed in the last three years.	etails about th
6. 	What counties do you serve?	
I cer	certify that I am a duly authorized officer or representative of the Sponsor listed above and the information processor true, accurate, and complete.	rovided herein
15 (1	arde, accurate, and complete.	
Sign	ignature of Executive Director or Board Chair Date	