**ID:** COL-144

## SUBMISSION FORM TO REQUEST APPROVAL FOR PARTICIPATION/SYNDICATION LOAN

Date of Submission:	Member #	Member Name:			
If there are multiple loans Submission Worksheet – F SFTP connection or send	Participation Loan Lis	t and send the workshee	et with this f	orm throug	h the
Loan Number:	Borrower:				
Property Address:					
Property Name:					
Property Type:		No. of Units:			
Original Loan Amount \$:		_ Origination Date:	Origi	nal LTV: _	
Appraisal Amount \$:		_ Appraisal Date:			
The following document pledge participation/syn		o support your instituti	on's reque	est to	
1) Submitted test file sar	mple loan level data (TI	ESTPART) through FHLBN	Y SFTP?	YES	□NO
2) Participation/Co-Lend	ling Agreement (s)				
3) Servicing Agreement	(s) Servicer Name:			(If applicab	le)
4) Custodial Agreement			_(If applical	ble)	
5) Is your institution the Lead	d Bank in the participati	on/syndication?		YES	□ NO
If No, are the other partici	pants and/or Lead Ban	k FHLBNY Members?		☐ YES	□NO
6) Mortgage Servicing Right	s ("MSR") Owned By: _				
Participant Information: smallest)	(Please list in order	of largest participant o	ownership	percentag	jes to
Lead Bank Name:			% Owned	l:	_
Participant #2 Name:		% Owned	l:	_	
Participant #3 Name:		% Owned	l:	_	
Participant #4 Namo:			% Owner	ı.	

<sup>\*</sup> Lead Bank and Participants' Ownership Percentages must equal 100%

After approval of the participation/ syndication loan, a semi-annual certification will be required from the CFO of the Member that pledges the loan. The certification is required to confirm if any changes have occurred with regards to participants, their roles and/or percentage of participation/syndication from the original submission for approval. Changes identified from the certification will require the Member to provide an update on their next monthly data submission for the participation/ syndication loan.

Please be advised if the participation/ syndication loan is \$25,000,000 or greater, review and approval is required for the loan by FHLBNY's staff. Complete the Submission Form to Request Approval of Individual Loans of \$25 Million or Greater (COL-128-IP) along with any required documentation.

## Sign this form and click on the submit button to send:

Date:/	
Institution Name:	_
Phone: () FAX: ()	_
E-Mail:@	į.
Name/Title:	_
By:	
S/	_
(By typing or signing your name next to the S/ you indicate placement of your signature on the form and agree to be bound by the statements contained in this document.)	his

## Send the supporting documentation via one of the following methods:

- Electronically through the <u>SFTP connection to the FHLBNY</u>. (Reference the letters "doc" in each filename.
- Hard copy or disc via postal mail:

ATTN: Collateral Requests Federal Home Loan Bank of New York 70 Hudson Street, 7th Floor Jersey City, NJ 07302

## Please direct all questions regarding the pledge requirements to:

Tisa Surat, AVP, Collateral Initiatives and Support Manager, Phone (201) 356-1058 Email <u>CollateralDocs@fhlbny.com</u>