



# Credit Relief Outreach Program (CROP) Guarantee Amount Increase Request

For WHEDA Use Only	
Date Received	_____
Status	_____

LENDER NAME: \_\_\_\_\_ WHEDA LENDER # \_\_\_\_\_  
 CONTACT PERSON: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_ FAX: \_\_\_\_\_  
 CITY/STATE/ZIP: \_\_\_\_\_  
 EMAIL ADDRESS: \_\_\_\_\_  
 WHEDA LOAN# \_\_\_\_\_ BORROWER \_\_\_\_\_

### LENDER NOTICE

A new Note must be written for the increase amount only. The Note must adhere to CROP program guidelines at the time of closing. Aggregate guarantee amount per calendar year cannot exceed \$250,000. The original guarantee percentage provided by WHEDA may be reduced as a result of this loan increase according to guarantee percentage guidelines.

### LOAN INFORMATION

ORIGINAL LOAN AMOUNT \_\_\_\_\_  
 LOAN INCREASE AMOUNT + \_\_\_\_\_  
 AGGREGATE LOAN AMOUNT = \_\_\_\_\_

### GUARANTEE INFORMATION

ORIGINAL GUARANTEE AMOUNT \_\_\_\_\_  
 GUARANTEE AMOUNT INCREASE + \_\_\_\_\_  
 AGGREGATE GUARANTEE AMOUNT = \_\_\_\_\_

### ADDITIONAL WHEDA APPLICATION FEE CALCULATION

ORIGINAL GUARANTEE AMOUNT \_\_\_\_\_ X .02 = \_\_\_\_\_ **(A)** If less than \$500, enter \$500  
 If over \$2,500, enter \$2,500

AGGREGATE GUARANTEE AMOUNT \_\_\_\_\_ X .02 = \_\_\_\_\_ **(B)** If less than \$500, enter \$500  
 If over \$2,500, enter \$2,500

ADDITIONAL WHEDA APPLICATION FEE: **(B) - (A)** = \_\_\_\_\_

### AGGREGATE AMOUNT OF EXPENSES INCURRED PRIOR TO LOAN INCREASE ORIGINATION

Expenses already incurred which will be paid/reimbursed with CROP loan proceeds MUST be detailed on a Disbursement Record (Form 5) and submitted along with this application \$ \_\_\_\_\_

**LENDER QUESTIONS**

- 1) Is the original CROP loan which is currently guaranteed by WHEDA current with payments? \_\_\_\_ YES \_\_\_\_ NO
- 2) Detail the reason for this loan increase request:
- 3) Are there any adverse changes in the borrower’s situation that WHEDA should be aware of in considering this request?

**FINANCIAL INFORMATION**

- 1) Complete the Cash Flow Budget Worksheet (Form 4) and submit with this application.
- 2) State the **ENDING CASH BALANCE** from the worksheet (must be positive to qualify): \_\_\_\_\_
- 3) **DEBT / ASSET RATIO OF PROPOSED PROJECT** (Minimum 40%, cannot exceed 85%)
  - Dollar amount of Project debt (A): \_\_\_\_\_
  - Dollar amount of Project assets (B): \_\_\_\_\_
  - Project Debt / Asset Ratio: (A) / (B): \_\_\_\_\_

The lender asserts that, to their knowledge, the borrower meets the eligibility requirements set forth under the CROP guarantee program. The lender had read the CROP Lender Manual and agrees to adhere to all program policies. Any misrepresentation of information stated on this application or supporting documents which materially affects the borrower’s eligibility or terms of the guarantee may result in denial or termination of this request.

Lender Signature: \_\_\_\_\_

Print Lender Name: \_\_\_\_\_ Date: \_\_\_\_\_