

REQUEST FOR CERTIFICATION OF ELIGIBILITY

PRIVACY ACT NOTICE STATEMENT: The information contained herein is to be used by the agency collecting it to determine whether you qualify as a prospective mortgagor for mortgage insurance under the agency's program. It will not be disclosed outside the agency without your consent except to financial institutions for verification of your eligibility and as required and permitted by law. You do not have to give us this information, but, if you do not, your application for approval as a prospective mortgagor for mortgage insurance may be delayed or rejected. This information request is authorized by Title 12, U.S.C., §1701 et. seq.

INSTRUCTIONS

LENDER OR LOCAL PROCESSING AGENCY: Complete items 1 through 7. Have applicant complete item 8. Forward directly to the Department of Hawaiian Home Lands (DHHL).

DHHL: Please complete Parts II and III and return **DIRECTLY** to Lender or Local Processing Agency named in Item 2.

PART I – REQUEST

1. TO: Department of Hawaiian Home Lands ATTN.: FHA P.O. Box 1879 Honolulu, HI 96805	2. FROM: (Name of Lender or Local Processing Agency)
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I CERTIFY THAT THIS CERTIFICATION HAS BEEN SENT DIRECTLY TO DHHL AND HAS NOT PASSED THROUGH THE HANDS OF THE APPLICANT OR ANY OTHER PARTY.

3. Signature of Lender or Official of Local Processing Agency	4. Title	5. Date
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6. INFORMATION TO BE CERTIFIED:

Applicant is a native Hawaiian as defined in Section 247 of the National Housing Act (12 U.S.C. 1715z-12), as amended by PL 107-73 §215. Applicant holds the following homestead lease in good standing (not cancelled or in default):
 Lease No. _____ to TMK: _____ Effective Date: _____

TO DHHL: I have applied for mortgage insurance and stated that I have an effective lease on Hawaiian home lands. You are authorized to verify this information and to supply this lender or local processing agency identified above with the information requested in items 9 through 12. DHHL is held harmless by me for furnishing true and correct information.

7. NAME AND ADDRESS OF APPLICANT	8. SIGNATURE OF APPLICANT
	SSN: _____

PART II – TO BE COMPLETED BY DHHL

9. VERIFICATION OF NATIVE HAWAIIAN ANCESTRY: The above named applicant has been verified as a native Hawaiian as defined in Section 247 of the National Housing Act (12 U.S.C. 1715z-12), as amended by PL 107-73 §215, and possesses a homestead lease in good standing (not cancelled or in default) issued under Section 207(a) of the Hawaiian Homes Commission Act of 1920, as amended.

10. LEASE INFORMATION: LEASE NO. _____ TMK: _____
 COMMENCEMENT DATE OF LEASE: _____
 LEASE RENT: _____ CURRENT? YES _____ NO _____
 REAL PROPERTY TAXES: CURRENT? YES _____ NO _____

(LESSEES ARE EXEMPT FROM REAL PROPERTY TAXES FOR SEVEN YEARS FROM COMMENCEMENT DATE OF LEASE.)

LOAN NO.	DATE OF LOAN	ORIGINAL AMT.	CURRENT BAL.	INSTALLMENTS	NO. OF LATE PMTS. W/IN LAST 24 MOS.		
					30	60	90

12. ADDITIONAL INFORMATION WHICH MAY BE OF ASSISTANCE IN DETERMINATION OF CREDIT WORTHINESS: (Please include information on loans paid in full.)

PART III – CERTIFICATION

13. Signature	14. Title	15. Date
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RETURN DIRECTLY TO LENDER OR LOCAL PROCESSING AGENCY