



First Front Door (FFD) Reservation Extension or Status Reversal

This Form must be completed to request an extension of the FFD reservation eligibility period (beyond the time limitation prescribed in the FFD Manual of 180 days) or to request a status reversal of an expired FFD reservation. Extensions of up to 90 days and status reversals may be granted at the sole discretion of the Federal Home Loan Bank of Pittsburgh (FHLBank); as such, submitting this form is not a guarantee that an extension or status reversal will be granted by FHLBank.

The FHLBank member institution that requested the FFD Reservation (Member) should complete this Form and submit it with applicable documents to firstfrontdoor@fhlb-pgh.com.

Section A

Complete the information below and indicate whether an extension or status reversal is being requested by checking the appropriate box.

Homebuyer Full Name: _____

FFD Reservation Number: _____

Member/Lender: _____

Reservation Eligibility Period Extension (See Section B) Status Reversal (See Section C)

Section B (Complete Only If a Reservation Eligibility Period Extension is Being Requested)

Complete the information below to request an extension of the FFD reservation eligibility period. FHLBank will review the information to determine whether an extension to the reservation eligibility period (up to 90 days from original expiration date) will be granted.

- Original Reservation Expiration Date: _____
- Is the borrower currently under agreement?* Yes No
Closing Date, if applicable: _____
*If yes, please provide a copy of the executed Sales Agreement and any closing date addendums.
- Reason for request (please provide as much detail as possible):

Section C

Complete the information below to request a status reversal of an expired FFD reservation. FHLBank will review the information to determine if the file is eligible for a status reversal.

- Original Reservation Expiration Date: _____
- Does the Borrower currently have an active, fully-executed Sales Agreement?* Yes No
Anticipated closing date: _____
*If yes, please provide a copy of the executed Sales Agreement as well as any closing date addendums.
- Has the borrower gone to Settlement?** Yes No
Closing Date: _____
**If yes, please provide a copy of the Closing Disclosure.

This form must be completed by a FHLBank Member

I, the undersigned, hereby certify that I am an authorized representative of the FHLBank Member. For and on behalf of the Member, I certify that all the information included herein is true, complete and accurate as of the date listed beside my signature.

Name of Requestor

Member Institution of Requestor

Signature of Requestor

Date

**Please call the FHLBank’s Community Investment Department at 800-288-3400, Option 4, with questions.
Please submit executed form and applicable documents to firstfrontdoor@fhlb-pgh.com.**