

CCAP CLOSING FUNDS REQUEST

Funds must be requested a minimum of 48 hours prior to closing. To submit a request for closing funds, fax AHFC Form UND-15 to the below number.

To: AHFC Underwriting Department
Fax: 907-330-8475

REQUESTED BY

Name: _____	Title: _____
Seller/Service: _____	Phone: _____

BORROWER INFORMATION

US Bank/AHFC Loan No.: _____
Borrower Name: _____
Co-Borrower Name: _____

TITLE COMPANY INFORMATION

Company Name: _____	
Escrow Number: _____	
Funds Requested: _____	Closing Date: _____

Authorized Signature

Date

HANDWRITTEN FORMS WILL NOT BE PROCESSED