



Instructions

When recommending a MF Counterparty for FreddieMac approval, MF Seller/Service providers should submit this Request to MF Underwriting or MF Asset Management, as applicable. Seller/Service providers must comply at all times with the requirements of the Multifamily Seller/Service provider Guide (Guide) and any recommended counterparty must meet applicable eligibility and Guide requirements.

Please submit this form to your Multifamily Underwriting or Asset Management representative.

Approval Request

Section A: Seller/Service provider Information

Seller/Service provider Name	Seller/Service provider Number
City	State

Section B: Counterparty Information

Counterparty Name	City	State
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Rating Agency	Counterparty Rating	As Of Date (mm/dd/yyyy)
Standard & Poor's		
Moody's		
Fitch		

Entity	City & State	Relationship
		Direct Parent
		Ultimate Parent

Section C: Credit Enhancement Information

Amount	Term (in months)
Product Type: <input type="checkbox"/> Cap <input type="checkbox"/> Swap <input type="checkbox"/> Letter of Credit <input type="checkbox"/> Guaranty <input type="checkbox"/> Other	
Purpose: <input type="checkbox"/> New <input type="checkbox"/> Replace <input type="checkbox"/> Renew	

Description

Section D: Counterparty Audited Financials

If financial data is not publicly available, Seller/Service must submit the counterparty's audited financial statements for the past two years and provide an auditor's report on the counterparty's internal control structure. Indicate if the audited financial statements are prepared at the:

- Counterparty level
 Counterparty's parent level

If prepared at the parent level, a consolidating worksheet must accompany the audited financial statement.

Section E: Signature of Seller/Service Recommending Counterparty for Approval

The undersigned duly authorized representative of Seller/Service hereby certifies to the foregoing as of the date noted.

Signature of Authorized Officer _____

Date _____ **Officer's Title** _____

Officer's Phone _____ **Email Address** _____

Business Address _____
