

REAL ESTATE ESCROW DEPOSIT ACCOUNT APPLICATION

TO:

(Name of Financial Institution)

(Address)

FROM:

(Name of Real Estate Broker/Office)

The undersigned real estate broker (the "depositor") hereby establishes a Real Estate Escrow Deposit Account (the "Escrow Account") pursuant to Connecticut Public Act No. 91-314, "An Act Concerning the Use of Real Estate Escrow Deposits for Mortgage Assistance for First-Time Homebuyers," as such act may be amended from time to time. The depositor instructs you to establish the Escrow Account in the name of the depositor as follows:

1. The Escrow Account is to be established and governed by your customary rules and procedures governing NOW (negotiable order of withdrawal) accounts. This means the interest will be accrued and paid in the same manner and at the same interest rate(s) customarily applicable to your NOW accounts.
2. **The Escrow Account Number is** _____
3. You agree to limit your service charges on the Escrow Account (if you choose not to waive these service charges) to your customary service charges on NOW accounts, or the amount of interest which has accrued in the Escrow Account whichever is less.
4. Please remit all accrued interest (net of service charges if any) at least quarterly to the Connecticut Housing Finance Authority, together with a periodic statement showing the name of the depositor, the amount of interest accrued, and the amount of service charge (if any) deducted from accrued interest.

Accrued interest remitted by CHECK, draft, or similar instrument via U.S. Mail to the Authority at the following address:

Connecticut Housing Finance Authority
Attn: Finance Department
999 West Street
Rocky Hill, CT 06067

5. The depositor hereby agrees that it shall have the sole responsibility for determining what funds shall be deposited to the Escrow Account.

Please send a COPY of this application, once completed, to:

CONNECTICUT HOUSING FINANCE AUTHORITY
999 WEST STREET
ROCKY HILL, CT 06067
(860) 721-9501

ATTN: FINANCE DEPARTMENT

Very truly yours,

(Depositor/Account Name)

(Depositor Address)

(Depositor Telephone Number)

Sent on _____, 20_____

By: _____
(Authorized Signature for Depositor)

Please print name here