

APPLICATION FOR RURAL ASSISTANCE (NONFARM TRACT) Uniform Residential Loan Application

This application is designed to be completed by the applicant with the lender's assistance. Applicants should complete this form as "Applicant #1" or "Applicant #2", as applicable. All Applicants must provide information (and the appropriate box checked) when the income or assets of a person other than the "Applicant" (including the Applicant's spouse) will be used as a basis for loan qualification or the income or assets of the Applicant's spouse will not be used as a basis for loan qualification, but his or her liabilities must be considered because the Applicant resides in a community property state, the security property is located in a community property state, or the Applicant is relying on other property located in a community property state as a basis for repayment of the loan.

I. TYPE OF MORTGAGE AND TERMS OF LOAN

| | | |
|---|--|---|
| Mortgage Applied for: <input type="checkbox"/> V.A. <input type="checkbox"/> Conventional <input type="checkbox"/> Other: | Agency Case Number | Lender Account Number |
| <input type="checkbox"/> FHA <input type="checkbox"/> USDA/Rural Housing Service | | |
| Amount \$ | Interest Rate % | No. of Months |
| | Amortization Type: <input type="checkbox"/> Fixed Rate <input type="checkbox"/> Other (Explain): | <input type="checkbox"/> GPM <input type="checkbox"/> ARM (Type): |

II. PROPERTY INFORMATION AND PURPOSE OF LOAN

| | |
|---|--------------|
| Subject Property Address (Street, City, State, ZIP) | No. of Units |
|---|--------------|

| | |
|---|------------|
| Legal Description of Subject Property (Attach description if necessary) | Year Built |
|---|------------|

| | |
|--|---|
| Purpose of Loan: <input type="checkbox"/> Purchase <input type="checkbox"/> Construction <input type="checkbox"/> Other (Explain): | Property will be: <input type="checkbox"/> Primary Residence <input type="checkbox"/> Secondary Residence <input type="checkbox"/> Investment |
| <input type="checkbox"/> Refinance <input type="checkbox"/> Construction-Permanent | |

Complete this line if construction or construction-permanent loan.

| | | | | | |
|-------------------|------------------|--------------------------|-----------------------------|-----------------------------|------------------|
| Year Lot Acquired | Original Cost \$ | Amount Existing Liens \$ | (a) Present Value of Lot \$ | (b) Cost of Improvements \$ | Total (a + b) \$ |
|-------------------|------------------|--------------------------|-----------------------------|-----------------------------|------------------|

Complete this line if this is a refinance loan.

| | | | | |
|---------------|------------------|--------------------------|----------------------|---|
| Year Acquired | Original Cost \$ | Amount Existing Liens \$ | Purpose of Refinance | Describe Improvements <input type="checkbox"/> Made <input type="checkbox"/> To be made |
| | | | | Cost: \$ |

| | | |
|------------------------------------|------------------------------------|---|
| Title will be held in what Name(s) | Manner in which Title will be held | Estate will be held in: <input type="checkbox"/> Fee Simple <input type="checkbox"/> Leasehold (Show expiration date) |
|------------------------------------|------------------------------------|---|

| | |
|---|--|
| Source of Down Payment, Settlement Charges and/or Subordinate Financing (Explain) | |
|---|--|

III. APPLICANT INFORMATION

| Applicant #1 | Applicant #2 |
|---|---|
| Name (include Jr. or Sr. if applicable) | Name (include Jr. or Sr. if applicable) |

| | | | | | | | |
|------------------------|------------------------------|--------------|-------------|------------------------|------------------------------|--------------|-------------|
| Social Security Number | Home Phone (Incl. Area Code) | DOB mm/dd/yy | Yrs. School | Social Security Number | Home Phone (Incl. Area Code) | DOB mm/dd/yy | Yrs. School |
|------------------------|------------------------------|--------------|-------------|------------------------|------------------------------|--------------|-------------|

| | | | |
|--|--|--|--|
| <input type="checkbox"/> Married <input type="checkbox"/> Unmarried (Include single divorced, widowed) | Dependents (Not listed by Applicant #2) No. Ages | <input type="checkbox"/> Married <input type="checkbox"/> Unmarried (Include single divorced, widowed) | Dependents (Not listed by Applicant #1) No. Ages |
| <input type="checkbox"/> Separated | | <input type="checkbox"/> Separated | |

| | |
|---|--|
| Present Address (Street, City State, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs. | Present Address (Street, City, State, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs. |
|---|--|

| | |
|---|---|
| Mailing Address if different from Present Address | Mailing Address if different from Present Address |
|---|---|

If residing at present address for less than two years, complete the following:

| | |
|--|---|
| Former Address (Street, City State, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs. | Former Address (Street, City, State, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs. |
|--|---|

According to the Paperwork Reduction Act 1995, an agency may not conduct or sponsor, and a person is not are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0172. The time required to complete this information collection is estimated to average 1-1/2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

IV. EMPLOYMENT INFORMATION

| Applicant #1 | | | Applicant #2 | | |
|---|----------------------------------|--|---|----------------------------------|--|
| Name & Address of Employer <input type="checkbox"/> Self-Employed | Yrs./Mos. on the job | Yrs./Mos. employed in this line of work/profession | Name & Address of Employer <input type="checkbox"/> Self-Employed | Yrs./Mos. on the job | Yrs./Mos. employed in this line of work/profession |
| | | | | | |
| Position/Title/Type of Business | Business Phone (Incl. Area Code) | | Position/Title/Type of Business | Business Phone (Incl. Area Code) | |

If employed in current position for less than two years or if currently employed in more than one position, complete the following:

| | | | | | |
|---|-------------------|----------------------|---|-------------------|----------------------|
| Name & Address of Employer <input type="checkbox"/> Self-Employed | Dates (From > To) | Monthly Income \$ | Name & Address of Employer <input type="checkbox"/> Self-Employed | Dates (From > To) | Monthly Income \$ |
| | | | | | |

| | | | |
|---------------------------------|----------------------------------|---------------------------------|----------------------------------|
| Position/Title/Type of Business | Business Phone (Incl. Area Code) | Position/Title/Type of Business | Business Phone (Incl. Area Code) |
|---------------------------------|----------------------------------|---------------------------------|----------------------------------|

| | | | | | |
|---|-------------------|----------------------|---|-------------------|----------------------|
| Name & Address of Employer <input type="checkbox"/> Self-Employed | Dates (From > To) | Monthly Income \$ | Name & Address of Employer <input type="checkbox"/> Self-Employed | Dates (From > To) | Monthly Income \$ |
| | | | | | |

| | | | |
|---------------------------------|----------------------------------|---------------------------------|----------------------------------|
| Position/Title/Type of Business | Business Phone (Incl. Area Code) | Position/Title/Type of Business | Business Phone (Incl. Area Code) |
|---------------------------------|----------------------------------|---------------------------------|----------------------------------|

V. MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION

| Gross Monthly Income | Applicant #1 | Applicant #2 | Total | Combined Monthly Housing Expense | Present | Proposed |
|--|--------------|--------------|-------|----------------------------------|---------|----------|
| Base Empl. Income* | \$ | \$ | \$ | Rent | \$ | |
| Overtime | | | | First Mortgage (P&I) | | \$ |
| Bonuses | | | | Other Financing (P&I) | | |
| Commissions | | | | Hazard Insurance | | |
| Dividends/Interest | | | | Real Estate Taxes | | |
| Net Rental Income | | | | Mortgage Insurance | | |
| Other (Before completing see the notice in "describe other income," below) | | | | Homeowner Assn. Dues | | |
| | | | | Other | | |
| Total | \$ | \$ | \$ | Total | \$ | \$ |

***Self Employed Applicant may be required to provide additional documentation such as tax returns and financial statements.**

| A1/A2 | Describe Other Income Notice: Alimony, child support, or separate maintenance income need not be revealed if the Applicant #1, (A 1) or Applicant #2 (A2) does not choose to have it considered for repaying this loan. | Monthly Amount |
|-------|--|----------------|
| | | |
| | | |
| | | |
| | | |
| | | |

VI. ASSETS AND LIABILITIES

This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Applicants if their assets and liabilities are sufficiently joined so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise separate Statements and Schedules are required. If the Applicant #2 section was completed about a spouse, this Statement and supporting schedules must be completed about that spouse also.

Completed Jointly Not Jointly

| ASSETS | | Cash or Market Value | | LIABILITIES | | |
|---|-------------|--|-------------------|-----------------------------|----------------|--|
| Description | | Name and Address of Company | \$ Payment/Months | \$ | Unpaid Balance | |
| Cash deposit toward purchase held by: | \$ | Liabilities and Pledged Assets. List the creditor's name, address and account number for all outstanding debts, including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. Use continuation sheet, if necessary. Indicate by (*) those liabilities which will be satisfied upon sale of real estate owned or upon refinancing of the subject property. | | | | |
| List checking and saving accounts below | | | | | | |
| Name and Address of Bank, S&L, or Credit Union | | Acct. No. | | | | |
| Acct. No. | \$ | Name and Address of Company | \$ Payment/Months | \$ | | |
| Name and Address of Bank, S&L, or Credit Union | | Acct. No. | | | | |
| Acct. No. | \$ | Name and Address of Company | \$ Payment/Months | \$ | | |
| Name and Address of Bank, S&L, or Credit Union | | Acct. No. | | | | |
| Acct. No. | \$ | Name and Address of Company | \$ Payment/Months | \$ | | |
| Name and Address of Bank, S&L, or Credit Union | | Acct. No. | | | | |
| Acct. No. | \$ | Name and Address of Company | \$ Payment/Months | \$ | | |
| Name and Address of Bank, S&L, or Credit Union | | Acct. No. | | | | |
| Acct. No. | \$ | Name and Address of Company | \$ Payment/Months | \$ | | |
| Stocks & Bonds (Company name/number & description) | \$ | Acct. No. | | | | |
| | \$ | Name and Address of Company | \$ Payment/Months | \$ | | |
| | \$ | Acct. No. | | | | |
| | \$ | Name and Address of Company | \$ Payment/Months | \$ | | |
| Life insurance net cash value | \$ | Acct. No. | | | | |
| Face amount: \$ | \$ | Name and Address of Company | \$ Payment/Months | \$ | | |
| Subtotal Liquid Assets | (\$) | Acct. No. | | | | |
| Real estate owned (Enter market value from schedule of real estate owned) | \$ | Name and Address of Company | \$ Payment/Months | \$ | | |
| Vested interest in retirement fund | \$ | Acct. No. | | | | |
| Net worth of business(es) owned (Attach financial statement) | \$ | Name and Address of Company | \$ Payment/Months | \$ | | |
| Automobiles owned (Make and year) | \$ | Acct. No. | | | | |
| | \$ | Alimony/Child Support/Separate Maintenance Payments Owed to: | \$ | | | |
| | \$ | Job Related Expense (Child care, union dues, etc.) | \$ | | | |
| | \$ | Total Monthly Payments | (\$) | | | |
| Other Assets (Itemize) | \$ | Net Worth (a minus b) | | Total Liabilities b. | | |
| | \$ | | | | | |
| | \$ | | | | | |
| | \$ | | | | | |
| Total Assets a. | (\$) | | | | | |

IX. ACKNOWLEDGMENT AND AGREEMENT

Each of the undersigned specifically represents to Lender and to Lender's actual or potential agents, brokers, processors, attorneys, insurers, services, successors and assigns and agrees and acknowledges that: (1) the information provided in this application is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this application may result in civil liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Sec. 1001, et seq.; (2) the loan requested pursuant to this application (the "loan") will be secured by a mortgage or deed of trust on the property described herein, (3) the property will not be used for any illegal or prohibited purpose or use; (4) all statements made in this application are made for the purpose of obtaining a residential mortgage loan; (5) the property will be occupied as indicated herein; (6) any owner or servicer of the Loan may verify or reverify any information contained in the application from any source named in this application, and Lender, its successors or assigns may retain the original and/or an electronic record of this application, even if the Loan is not approved; (7) the Lender and its agents, brokers, insurers, servicers, successors and assigns may continuously rely on the information contained in the application, and I am obligated to amend and/or supplement the information provided in this application if any of the material facts that I have represented herein should change prior to closing of the Loan; (8) in the event that my payments on the Loan become delinquent, the owner or servicer of the Loan may, in addition to any other rights and remedies that it may have relating to such delinquency, report my name and account information to one or more consumer credit reporting agencies; (9) ownership of the Loan and/or administration of the Loan account may be transferred with such notice as may be required by law; (10) neither Lender nor its agents, brokers, insurers, servicers, successors or assigns has made any representation or warranty, express or implied, to me regarding the property or the condition or value of the property; and (11) my transmission of this application as an "electronic record" containing my "electronic signature," as those terms are defined in applicable federal and/or state laws (excluding audio and video recordings), or my facsimile transmission of this application containing a facsimile of my signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.

| | | | |
|-----------------------------------|------|-----------------------------------|------|
| Applicant's Signature X | Date | Applicant's Signature X | Date |
|-----------------------------------|------|-----------------------------------|------|

X. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may discriminate neither on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

| | |
|---|---|
| BORROWER <input type="checkbox"/> I do not wish to furnish this information | CO-BORROWER <input type="checkbox"/> I do not wish to furnish this information |
| Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino | Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino |
| Race <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White | Race <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White |
| Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male | Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male |

| | | | |
|--|---|------|--|
| To be Completed by Interviewer This application was taken by: <input type="checkbox"/> face-to-face interview <input type="checkbox"/> by mail <input type="checkbox"/> by telephone <input type="checkbox"/> Internet | Interviewer's Name (<i>Print or type</i>) | | Name and Address of Interviewer's Employer |
| | Interviewer's Signature | Date | |
| | Interviewer's Phone Number (<i>Incl. Area Code</i>) | | |

Continuation For/Residential Loan Application

| | | |
|---|-------------------|------------------------|
| Use if you need more space to complete the Residential Loan Application Mark A1 for Applicant #1 or A2 for Applicant #2 | Applicant #1 (A1) | Agency Account Number: |
| | Applicant #2 (A2) | Lender Account Number: |

Additional Information Required for RHS Assistance

1. Loan Type: Section 502 Section 504 Loan Grant

APPLICANT #1

2. Have you ever obtained a loan/grant from RHS?
Yes No

4. Are you a relative to an RHS Employee or Closing agent/attorney?
Yes No
If yes, who? _____
Relationship _____

6. Are you a Veteran? Yes No

8. Complete for all household members.

To be considered eligible for RHS assistance, all household income including any income not shown in Section V of this application, must be disclosed below:

| Name | Age | Are you a full time student? y/n | Do you want to be considered for an adjustment from household income because of a disabling condition? y/n | Annual Wage Income | Source of Wage Income (employer) | Annual Non-Wage Income | Source of Non-Wage Income (social security, alimony, child support, separate maintenance, etc.) |
|------|-----|----------------------------------|--|--------------------|----------------------------------|------------------------|---|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

9. Child Care (Minors who are 12 years of age or under for whom you have to hire a babysitter or leave at a child care center)
Cost per week \$ _____ Cost per month \$ _____

10. Name, Address and Telephone No. of Child care Provider(s).

11. Characteristics of Present Housing

Does the Dwelling:

| | | | | | |
|------------------------|------------------------------|-----------------------------|---|------------------------------|-----------------------------|
| Lack complete plumbing | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Physically deteriorated or structurally unsound | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Lack adequate heating | <input type="checkbox"/> | <input type="checkbox"/> | Overcrowded (More than 2 persons per room) | <input type="checkbox"/> | <input type="checkbox"/> |

12. Name, Address and Telephone Number of Present Landlord.

If residing at present address for less than two years, complete the following:

Name, Address and Telephone Number of Previous Landlord(s).

13. (For Section 504 Grants Only) I certify that as the condition of the grant, I/we will not engage in unlawful manufacture, distribution, dispensing, possession or use of a controlled substance in conducting any activity with the grant.

14. I am aware RHS does not warrant the condition or value of the property.

15. Notices to Applicant

Privacy Act. See attached sheet.

Social Security Number. The Debt Collection Act of 1982, Pub. L. 97-365, and 31 U.S.C. 7701(c) require persons applying for a federally insured or guaranteed loan to furnish his or her social security number (SSN). Failure to provide your SSN will result in the rejection of your application.

Right to Request Copy of Appraisal. You have the right to a copy of the appraisal report used in connection with your application for credit. If you wish a copy, please write us at the address of the Rural Development Field Office where you made application. In your written request, you must provide us with the complete name and address used when making application as well as a current mailing address. We must hear from you no later than 90 days after we notify you about the action taken on your credit application or you withdraw your application. The creditor, Rural Housing Service, may require you to reimburse the Agency for the cost of the appraisal.

Right to Financial Privacy Act of 1978, 12 U.S.C. 3401, et seq. You authorize RHS to have access to financial records held by financial institutions in connection with the consideration or administration of assistance to you. Financial records involving your loan and loan application will be available to RHS without further notice or authorization but will not be disclosed or released by RHS to another Government agency or department without your consent except as required or permitted by law.

Federal collection policies for consumer debts: Delinquencies, defaults, foreclosures and abuses of mortgage loans involving programs of the Federal Government can be costly and detrimental to your credit, now and in the future. The Federal Government, as mortgage lender in this transaction, its agencies, agents and assigns, are authorized to take any and all of the following actions in the event loan payments become delinquent on the mortgage loan covered by this application: (1) Report your name and account information to a credit bureau; (2) Assess additional interest and penalty charges for the period of time that payment is not made; (3) Assess charges to cover additional administrative costs incurred by the Government to service your account; (4) Offset amounts owed to you under other Federal programs, (5) Refer your account to a private attorney, the United States Department of Justice, a collection agency, or mortgage servicing agency to collect the amount due, and foreclose the mortgage, sell the property, and seek judgment against you for any deficiency; (6) If you are a current or retired Federal employee, take action to offset your salary, or civil service retirement benefits; (7) Refer your debt to the Internal Revenue Service for offset against any amount owed to you as an income tax refund; and (8) Report any resulting written-off debt of yours to the Internal Revenue Service as your taxable income. All of these actions can and will be used to recover any debts owed when it is determined to be in the interest of the lender and/or Federal Government to do so.

Unlawful Discrimination. "The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, or marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 14th and Independence Avenue, SW, Washington, DC 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer."

The Fair Housing Act prohibits discrimination in real estate-related transactions, or in the terms or conditions of such a transaction, because of race, color, religion, sex, disability, familial status, or national origin. If you believe you have been discriminated against for any of these reasons you can write the U. S. Department of Housing and Urban Development, Washington, D.C. 20410 or call (800) 669-9777.

Certification. As the applicant, I certify to the best of my knowledge and belief: (1) I am not presently debarred, suspended, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency; (2) I have not within a three year period preceding this proposal been convicted or had a civil judgment rendered against me for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, state, or local) transaction or contract under a public transaction; or commission of embezzlement, theft, forgery, bribery, falsification, or destruction of records, making false statement, or receiving stolen property; (3) I am not a judgment debtor on an outstanding judgment in favor of the United States which was obtained in any Federal court other than the United States Tax Court; and (4) I am not delinquent on any outstanding debt to the Federal Government (including any Federal agency or department).

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, sex, disability, familial status, national origin, marital status, age (provided the borrower has the capacity to enter into a binding contract), because all or a part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. If you believe you were denied a loan for this reason, you should contact the Federal Trade Commission, Washington, DC. 20580.

16. I AM unable to provide the housing I need on my own account, and I am unable to secure the credit necessary for this purpose from other sources upon terms and conditions which I can reasonably fulfill. I certify that the statements made by me in this application are true, complete to the best of my knowledge and belief and are made in good faith to obtain a loan.

SECTION 1001 OF TITLE 18, UNITED STATES CODE PROVIDES: "WHOEVER, IN ANY MATTER WITHIN THE JURISDICTION OF ANY DEPARTMENT OR AGENCY OF THE UNITED STATES KNOWINGLY AND WILLFULLY FALSIFIES, CONCEALS OR COVERS UP BY ANY TRICK, SCHEME, OR DEVICE A MATERIAL FACT, OR MAKES ANY FALSE, FICTITIOUS OR FRAUDULENT STATEMENTS OR REPRESENTATIONS, OR MAKES OR USES ANY FALSE WRITING OR DOCUMENT KNOWING THE SAME TO CONTAIN ANY FALSE, FICTITIOUS OR FRAUDULENT STATEMENT OR ENTRY, SHALL BE FINED UNDER THIS TITLE OR IMPRISONED NOT MORE THAN FIVE YEARS, OR BOTH."

NOTE TO APPLICANT: IF ANY INFORMATION ON THIS APPLICATION IS FOUND TO BE FALSE OR INCOMPLETE, SUCH FINDING, IN ADDITION TO POSSIBLE LIABILITY UNDER CIVIL AND CRIMINAL STATUS, MAY BE GROUNDS FOR DENIAL FOR THE REQUESTED CREDIT AND MAY BE A BASIS FOR DEBARMENT FROM PARTICIPATION IN ALL FEDERAL PROGRAMS UNDER 7 C.F.R. PART 3017.

Date _____ Signature of Applicant _____

Date _____ Signature of Applicant _____

| | | | |
|----------|-------------------------------------|---|--|
| 17. Date | Signature of Loan Approval Official | Determination of Eligibility _____ Eligible _____ Not Eligible | Racial Data Provided by _____ Applicant _____ RHS |
|----------|-------------------------------------|---|--|

18. Application received on _____
Application completed on _____

19. Credit Report Fee

Date Received: _____ Amount Received: \$ _____
Initial: _____

NOTICE TO APPLICANT REGARDING PRIVACY ACT INFORMATION

The information requested on this form is authorized to be collected by the Rural Housing Service (RHS), Rural Business-Cooperative Services (RBS), Rural Utilities Service (RUS) or the Farm Service Agency (FSA) ("the agency") by title V of the Housing Act of 1949, as amended (42 U.S.C. 1471 et seq.) or by the Consolidated Farm and Rural Development Act (7 U.S.C. 1921 et seq.), or by other laws administered by RHS, RBS, RUS or FSA.

Disclosure of information requested is voluntary. However, failure to disclose certain items of information requested, including your Social Security Number or Federal Identification Number, may result in a delay in the processing of an application or its rejection. Information provided may be used outside of the agency for the following purposes:

1. When a record on its face, or in conjunction with other records, indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, and whether arising by general statute or particular program statute, or by regulation, rule, or order issued pursuant thereto, disclosure may be made to the appropriate agency, whether Federal, foreign, State, local, or tribal, or other public authority responsible for enforcing, investigating or prosecuting such violation or charged with enforcing or implementing the statute, or rule, regulation, or order issued pursuant thereto, if the information disclosed is relevant to any enforcement, regulatory, investigative, or prosecutive responsibility of the receiving entity.
2. A record from this system of records may be disclosed to a Member of Congress or to a congressional staff member in response to an inquiry of the Congressional office made at the written request of the constituent about whom the record is maintained.
3. Rural Development will provide information from this system to the U.S. Department of the Treasury and to other Federal agencies maintaining debt servicing centers, in connection with overdue debts, in order to participate in the Treasury Offset Program as required by the Debt Collection Improvement Act, Pub. L. 104-134, Section 31001.
4. Disclosure of the name, home address, and information concerning default on loan repayment when the default involves a security interest in tribal allotted or trust land. Pursuant to the Cranston-Gonzales National Affordable Housing Act of 1990 (42 U.S.C. 12701 et seq.), liquidation may be pursued only after offering to transfer the account to an eligible tribal member, the tribe, or the Indian Housing Authority serving the tribe(s).
5. Referral of names, home addresses, social security numbers, and financial information to a collection or servicing contractor, financial institution, or a local, State, or Federal agency, when Rural Development determines such referral is appropriate for servicing or collecting the borrower's account or as provided for in contracts with servicing or collection agencies.
6. It shall be a routine use of the records in this system of records to disclose them in a proceeding before a court or adjudicative body, when: (a) the agency or any component thereof; or (b) any employee of the agency in his or her official capacity; or (c) any employee of the agency in his or her individual capacity where the agency has agreed to represent the employee, or (d) the United States is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation, provided; however, that in each case, the agency determines that disclosure of the records is a use of the information contained in the records that is compatible with the purpose for which the agency collected the records.
7. Referral of names, home address, and financial information for selected borrowers to financial consultants, advisors, lending institutions, packagers, agents and private or commercial credit sources, when Rural Development determines such referral is appropriate to encourage the borrower to refinance the Rural Development indebtedness as required by title V of the Housing Act of 1949, as amended (42 U.S.C. 1471), or to assist the borrower in the sale of the property .
8. Referral of legally enforceable debts to the Department of the Treasury, Internal Revenue Service (IRS), to be offset against any tax refund that may become due the debtor for the tax year in which the referral is made, in accordance with the IRS regulations at 26 C.F.R. 301.6402-6T, Offset of Past Due Legally Enforceable Debt Against Overpayment, and under the authority contained in 31 U.S.C. 3720A.
9. Referral of information regarding indebtedness to the Defense Manpower Data Center, Department of Defense, and the United States Postal Service for the purpose of conducting computer matching programs to identify and locate individuals receiving Federal salary or benefit payments and who are delinquent in their repayment of debts owed to the U.S. Government under certain programs administered by Rural Development in order to collect debts under the provisions of the Debt Collection Act of 1982 (5 U.S.C. 5514) by voluntary repayment, administrative or salary offset procedures, or by collection agencies.
10. Referral of names, home addresses, and financial information to lending institutions when Rural Development determines the individual may be financially capable of qualifying for credit with or without a guarantee.
11. Disclosure of names, home addresses, social security numbers, and financial information to lending institutions that have a lien against the same property as Rural Development for the purpose of the collection of the debt. These loans can be under the direct and guaranteed loan programs.
12. Referral to private attorneys under contract with either Rural Development or with the Department of Justice for the purpose of foreclosure and possession actions and collection of past due accounts, in connection with Rural Development.
13. It shall be a routine use of the records in this system of records to disclose them to the Department of Justice when: (a) The agency or any component thereof; or (b) any employee of the agency in his or her official capacity where the Department of Justice has agreed to represent the employee; or (c) the United States Government, is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation and the use of such records by the Department of Justice is therefore deemed by the agency to be for a purpose that is compatible with the purpose for which the agency collected the records.

NOTICE TO APPLICANT REGARDING PRIVACY ACT INFORMATION- CONTINUED

14. Referral of names, home addresses, social security numbers, and financial information to the Department of Housing and Urban Development (HUD) as a record of location utilized by Federal agencies for an automatic credit prescreening system.

15. Referral of names, home addresses, social security numbers, and financial information to the Department of Labor, State Wage Information Collection Agencies, and other Federal, State, and local agencies, as well as those responsible for verifying information furnished to qualify for Federal benefits, to conduct wage and benefit matching through manual and/or automated means, for the purpose of determining compliance with Federal regulations and appropriate servicing actions against those not entitled to program benefits, including possible recovery of improper benefits.

16. Referral of names, home addresses, and financial information to financial consultants, advisors, or underwriters, when Rural Development determines such referral is appropriate for developing packaging and marketing strategies involving the sale of Rural Development loan assets.

17. Rural Development, in accordance with 31 U.S.C. 3711(e)(5), will provide to consumer reporting agencies or commercial reporting agencies information from this system indicating that an individual is responsible for a claim that is current.

18. Referral of names, home addresses, home telephone numbers, social security numbers, and financial information to escrow agents (which also could include attorneys and title companies) selected by the applicant or borrower for the purpose of closing the loan.

19. Disclosures pursuant to 5 U.S.C. 552a(b)(12): Disclosures may be made from this system to consumer reporting agencies as defined in the Fair Credit Reporting Act (15 U.S.C. 168a(f) or the Federal Claims Collection Act (31U.S.C. 3701(a)(3)).