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Form Approved - OMB No. 0560-0155

FSA-1980-25
(07-20-01)

U.S. DEPARTMENT OF AGRICULTURE
Farm Service Agency

APPLICATION FOR GUARANTEE

NOTE: According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not 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 0560-0155. The time required to complete this information collection is estimated to average 3.5 hours per response for the lender and 30 minutes per response for the borrower, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. **RETURN THIS COMPLETED FORM TO YOUR LOCAL FSA OFFICE.**

PART A - Loan Applicant Information

1. APPLICANT'S NAME		2. CO-APPLICANT'S NAME		3. APPLICANT'S TELEPHONE NO. (area code)		
4. APPLICANT'S ADDRESS				5. APPLICANT'S SSN OR TAX ID NO.		
6. APPLICANT'S BIRTH DATE (MM-DD-YYYY)		7. CO-APPLICANT'S BIRTH DATE (MM-DD-YYYY)		8. CO-APPLICANT'S SOCIAL SECURITY NO.		
9. TOTAL NUMBER OF HOUSEHOLD MEMBERS				10. TYPE OF OPERATION:		
<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> JOINT OPERATION <input type="checkbox"/> CORPORATION <input type="checkbox"/> COOPERATIVE <input type="checkbox"/> OTHER (Explain)				11. ACRES OWNED		
				12. ACRES RENTED		
13. MARITAL STATUS: <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> UNMARRIED (INCLUDING SINGLE, DIVORCED, AND WIDOWED)						
14. Have you ever conducted business under any other name? If "YES", what name?					YES	NO
15. Have you or any member of the entity obtained a direct or guaranteed loan from the Farm Service Agency or Rural Development?						
16. If "YES" to Item 15, was the loan paid in full? If not paid in full, please explain:						
17. Have you or any member of the entity ever been in receivership, been discharged in bankruptcy, or filed a petition for bankruptcy?						
18. If you answered "YES" to Item 17, provide details:						
19. Are you or any member of the entity delinquent on any debt to the United States Government?						
20. Are you (or all entity members if an entity applicant) a U.S. citizen?						
21. If "NO" to Item 20, are you a permanent resident? (Please include documentation)						
22. Are you a veteran? If "YES" please indicate branch and dates of service:						
23. Are you an employee, related to an employee, or an associate of an employee of the Lender or Farm Service Agency?						
24. Are you farming or ranching now? If "YES", number of years experience:						
25. If you answered "NO" to Item 24, but you have operated a farm in the past, list dates:						

Voluntary Information for Monitoring Purposes

26. ETHNICITY <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino		27. RACE (Choose as many boxes as applicable) <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		28. GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	
FSA USE ONLY:		29A. DATE RECEIVED (MM-DD-YYYY)		29B. DATE COMPLETED (MM-DD-YYYY)	

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, and 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, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice or TDD). USDA is an equal opportunity provider and employer.

PART B - Loan Applicant

STATEMENT REQUIRED BY THE PRIVACY ACT

The following statements are made in accordance with the Privacy Act of 1974 (5 U.S.C. 552a): The Farm Service Agency (FSA) is authorized by the Consolidated Farm and Rural Development Act, (7 U.S.C. 1921 et seq.), and the regulations promulgated thereunder, to solicit the information requested. The information requested is necessary for FSA to determine eligibility for credit or other financial assistance, service your loan, and conduct statistical analyses. Supplied information may be furnished to other Department of Agriculture agencies, the Internal Revenue Service, the Department of Justice or other law enforcement agencies, the Department of Defense, the Department of Housing and Urban Development, the Department of Labor, the United States Postal Service, or other Federal, State, or local agencies as required or permitted by law. In addition, information may be referred to interested parties under the Freedom of Information Act (FOIA), to financial consultants, advisors, lending institutions, packagers, agents, and private or commercial credit sources, to collection or servicing contractors, to credit reporting agencies, to private attorneys under contract with FSA or the Department of Justice, to business firms in the trade area that buy chattel or crops or sell them for commission, to Members of Congress or Congressional staff members, or to courts or adjudicative bodies. Disclosure of the information requested is voluntary. However, failure to disclose information requested, including your Social Security Number or Federal Tax Identification Number, may result in a delay in the processing of an application or its rejection.

RIGHT TO FINANCIAL PRIVACY ACT OF 1978

FSA has a right of access to financial records held by financial institutions in connection with providing assistance to you, as well as collecting on loans made to you or guaranteed by the government. Financial records involving your transaction will be available to FSA without further notice or authorization but will not be disclosed or released by this institution to another government Agency or Department without your consent except as required by law.

THE FEDERAL EQUAL CREDIT OPPORTUNITY ACT prohibits creditors from discriminating against applicants on the basis of race, color, religion, sex, national origin, marital status, or age (*provided the applicant 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.

CERTIFICATIONS, RESTRICTIONS, AND DISCLOSURE OF LOBBYING ACTIVITIES

1. The loan applicant certifies that: if any funds, by or on behalf of the loan applicant, have been or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant or Federal loan, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, or loan, the loan applicant shall complete and submit Standard Form - LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.
2. The loan applicant shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (*including contacts, subcontracts, and subgrants, under grants and loans*) and that all subrecipients shall certify and disclose accordingly.
3. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this statement is a prerequisite for making or entering into this transaction and is imposed by 31 U.S.C. 1352. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each failure.

ABUSE OF CONTROLLED SUBSTANCES

The loan applicant certifies that he or she as an individual, or any member, stockholder, partner or joint operator of an entity applicant, has not been convicted under Federal or State law of planting, cultivating, growing, producing, harvesting, or storing a controlled substance within the last 5 crop years, in accordance with 21 U.S.C. 889.

TEST FOR CREDIT

The individual or authorized party certifies that the needed credit without a loan guarantee, cannot be obtained by the individual applicant, or in the case of a business entity, the needed credit cannot be obtained considering all assets owned by the business entity and all of the individual members.

FEDERAL DEBT

The loan applicant certifies and acknowledges that any amounts paid by FSA on account of the liabilities of the guaranteed loan borrower will constitute a Federal debt owing to FSA by the guaranteed loan borrower. In such case, FSA may use all remedies available to it, including offset under the Debt Collection Improvement Act, to collect the debt from the borrower.

ACKNOWLEDGMENT

I certify that I accept and comply with the conditions stated thereon. I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith to obtain a loan. I understand that the approval period will not begin until a complete application has been filed. (Warning: section 1001 of Title 18, United States code provides for criminal penalties to those who provide false statements on loans. If any information on this application is found to be false or incomplete, such finding may be grounds for denial of the requested credit and civil and criminal prosecution.)

30. APPLICANT'S SIGNATURE	DATE (MM-DD-YYYY)
31. CO-APPLICANT'S SIGNATURE	DATE (MM-DD-YYYY)

PART G - Cash Flow and Interest Assistance Needs Analysis (To be completed by lender)

52. NET CASH FLOW (inflows - outflows) WITHOUT INTEREST ASSISTANCE	\$
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If a feasible plan cannot be developed (*net cash flow is negative*) without interest assistance, the applicant should be considered for interest assistance. The applicant must project a feasible plan with interest assistance or the request will be denied.

53. NET CASH FLOW (inflows - outflows) WITH INTEREST ASSISTANCE	\$
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If requesting Interest Assistance on an existing guaranteed loan, complete blocks below:

54. ORIGINAL AMOUNT \$	55. CLOSING DATE (MM-DD-YYYY)	56. INTEREST RATE BEFORE INTEREST ASSISTANCE _____ % <input type="checkbox"/> FIXED <input type="checkbox"/> VARIABLE	
57. MATURITY DATE (MM-DD-YYYY)	58. PRINCIPAL BALANCE \$	59. FULLY ADVANCED <input type="checkbox"/> YES <input type="checkbox"/> NO	60. NUMBER OF YEARS INTEREST ASSISTANCE REQUESTED

Part H - Lender Information and Certification

61. LENDING INSTITUTION NAME AND ADDRESS Telephone No. (area code)	62. LENDER TAX ID NO. 63. REGULATORY AGENCY
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64. LENDER CERTIFIES THAT:

- a. All applicable requirements in 7 C.F.R. 762, and Form FSA-1980-38 have been or will be met.
- b. It would not make the loan without an FSA guarantee.
- c. The cash flow projection demonstrates that the proposed loan is sound and within the borrower's repayment ability.
- d. The proposed collateral securing the loan is considered adequate.
- e. All documentation required by 7 C.F.R. 762, but not required to be submitted with the loan application, has been obtained and supports the data presented in this application.
- f. In connection with subsequent loans made within the same operating cycle, the loan applicant is in compliance with all loan agreements and all applicable certifications made are still valid.
- g. Application will be governed by Lender Agreement dated: _____
(MM-DD-YYYY)
- h. Application filed as a (*check one*): CERTIFIED LENDER (CLP) APPROVED LENDER (ALP) STANDARD ELIGIBLE

65. NAME AND TITLE OF LENDER'S REPRESENTATIVE	
66. AUTHORIZED LENDER REPRESENTATIVE SIGNATURE	DATE (MM-DD-YYYY)

PART I - Supporting Documentation (Please attach the following)**67. Certified Lender Program Lenders:**

- Narrative
- Balance sheet dated _____
- Cash flow budget
- Description of the location of each tract of land to be farmed by the loan applicant.
(This may be FSA Farm No., Legal Description, Plat Map, etc.)
- Entity Information (name, address, social security number, percent ownership, balance sheet for each member)

68. Standard Eligible Lenders Applying for Guarantees of \$50,000 or Less:

- Narrative
- Balance sheet dated _____
- Cash flow budget
- Description of the location of each tract of land to be farmed by the loan applicant.
(This may be FSA Farm No., Legal Description, Plat Map, etc.)
- Entity information (name, address, social security number, percent ownership, balance sheet for each member)
- Credit report
- Plan for servicing borrower

69. Standard Eligible Lenders Applying for Guarantees Greater than \$50,000:

- Narrative
- Balance sheet dated _____
- Cash flow budget
- Description of the location of each tract of land to be farmed by the loan applicant.
(This may be FSA Farm No., Legal Description, Plat Map, etc.)
- Entity information (name, address, social security number, percent ownership, balance sheet for each member)
- Credit report
- Plan for servicing borrower
- Proposed loan agreement
- Verification of all debts greater than \$1,000
- Verification of non-farm income
- 3 year production history
- 3 year financial history (income, expenses, balance sheets)
- If construction or development is proposed, a copy of the plans, specification, and schedule.

70. Request for Interest Assistance Information:

- Proposed debt repayment schedule
- Monthly cash flow budget (LOC only)