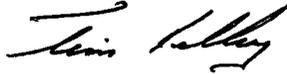


For: County Offices

**Procedure for Ordering Mortgage Credit Reports**

Approved by: State Executive Director



**1 Overview**

**A Background**

This notice replaces MO Notice FLP-295, dated 01-05-2006, which expires October 1, 2006.

A Blank Purchase Agreement (BPA) was established with the following vendor for purchase of mortgage credit reports.

Business Information Services  
1000 South Pioneer Drive  
Smyrna, GA 30082  
Telephone: 1-800-868-0012  
FAX: 404-794-8596  
BPA-648S-6-019

**B Contact**

Any questions concerning this Notice should be directed to the Farm Loan Programs Section in the State Office.

**C Filing Instructions**

A copy of this Notice should be filed preceding Instruction 1910-B and 1-FLP Handbook.

<b>Disposal Date</b> September 30, 2008	<b>Distribution</b> Farm Loan Teams, County Offices, AFLSs, DDs, CORs
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**2 Implementation**

**A Ordering from Business Information Services**

Mortgage credit reports will be ordered using the Factual Data Report-Credit Report Request, see Exhibit A. You may duplicate Exhibit A or download from the Missouri Intranet web site, Farm Loan page, State Forms folder.

Orders for credit reports will be mailed or faxed to the vendor at the Smyrna, Georgia, address.

**B Coding the Order Tickets**

The BPA number, BP-648S-6-019, **MUST** be shown at the top of the order form along with the correct **PAC code** identifying the reason the credit report is needed as follows:

F1Y1 –Processing – Recoverable

Credit reports ordered for new loans, or when a fee is collected from the applicant.

F2Y1 –Servicing – Non-recoverable

Credit reports ordered when no fee is collected.

**C Fees**

For loan processing purposes, the fees collected will be \$26.80 for individual reports and \$36.72 for joint reports.

**D Payment to Vendors**

Upon receipt of the credit report, submit a copy of the Credit Report Request to the State Office, Attn: Administrative Section. A signature and date accepting the credit report must be on the bottom of the form. This will notify State Office that the credit report has been received and that the payment can be processed.

FACTUAL DATA REPORT - CREDIT REPORT REQUEST

USDA/FSA _____ County Office _____ <b>BP-648S-6-019</b> <b>State BPA Number</b>	<b>AUTHORIZATION</b> I request the following Services _____ Farm Loan Manager	<b>PAC Code</b> <input type="checkbox"/> F1Y1 <input type="checkbox"/> F2Y1 _____ Date
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By requesting this report, it is agreed that the information received will be for our own use and will not be divulged to anyone except as required by public law: USDA/ FSA does not authorize any special or supplemental employment reports. However, the following are built into the contract and do not require authorization. APPLICANT: Basic 559-12 report, antecedent report(s) needed for two (2) year coverage; supplemental credit report (when required) - one only. Same reports as applicant when joint report requested.

SSN: \_\_\_\_\_

**Applicant**

Service Requested Date Requested \_\_\_/\_\_\_/\_\_\_

/	GSA#	Title
	559-12a	Mortgage Report (basic)
	559-12b	On Spouse
		Asset Investigation
		Other
		Other
		Other

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
(Last) (First) (Initial)

Resident Address: \_\_\_\_\_ How Long: \_\_\_\_\_  
 Telephone: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

If Rural Address Please include County: \_\_\_\_\_

Employer: \_\_\_\_\_ How Long: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_

Former Residence: \_\_\_\_\_  
 Address: \_\_\_\_\_ How Long: \_\_\_\_\_  
 City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

**Trade Applicant**

Account Number	Name of Firm	Address	City	St
_____	_____	_____	_____	_____

Please indicate if request is  individual or  Joint. If not indicated an individual Report will be prepared.

**SPOUSE** SSN: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
(Last) (First) (Initial)

Give former name if changed within past 2 years: \_\_\_\_\_

Resident Address: \_\_\_\_\_ How Long: \_\_\_\_\_  
 Telephone: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

If Rural Route Address Please include County: \_\_\_\_\_

Employer: \_\_\_\_\_ How Long: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_

Former Residence: \_\_\_\_\_  
 Address: \_\_\_\_\_ How Long: \_\_\_\_\_  
 City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

**Spouse Trade Applicant**

Account Number	Name of Firm	Address	City	St
_____	_____	_____	_____	_____

Fax/ Mail Report To:
Credit Manager USDA/FSA
Address
City/ST/Zip
Fax Number
Telephone Number

This Report is for:

- New Loan Application
- Existing Loan Servicing

Credit Investigator:

- May or  May Not contact Applicant