



United States Department of Agriculture
Rural Development
390 Red Cedar St., Suite G, Menomonie, WI 54751
715-232-2614 Ext. 4 FAX 855-715-8491
E-mail: RD.Menomonie@wi.usda.gov
Web Site- www.rurdev.usda.gov/wi
Office hours: Monday-Friday 8AM-4:30PM

TO WHOM IT MAY CONCERN:

We want to take this opportunity to thank you for your interest in obtaining a Rural Development Housing Repair Loan/Grant.

Our office strives to provide the best service to our customers. The following documents are attached and must be completed and returned to your local Rural Development Office located at the following address:

*USDA – Rural Development
390 Red Cedar Street, Suite G
Menomonie, WI 54751*

In order for us to expedite the processing of your loan application, please complete or furnish the following, **by answering all the questions that apply on Form RD 410-4 the faster the process will be:**

1. **Form RD 410-4, “Uniform Residential Loan Application”** – This form must be completed in its entirety. Specify in detail the addresses, assets, vehicles and liabilities.
2. **Form RD 3550-1 – “Authorization to Release Information”** – This form needs to be signed and dated by the applicants and co-applicants.
3. **Household Members Form** – Complete this in its entirety.
4. **Documentation needed:**
 - a) Evidence of home ownership and full legal description (tax statement and deed).
 - b) Copy of your most recent **Social Security Award Letter** (if applicable).
 - c) Copy of your latest **Real Estate Tax Statement** and a copy of the **Declaration page** of your **homeowners insurance**.
5. **Copy of last 2 months of bank statements.**
6. **If employed, copy of most recent 30 days worth of pay stubs.**
7. **Copy of most recent 2 years of SIGNED federal and state income tax returns.**
8. **Picture ID, evidence of age and evidence of taxpayer’s social security number are required. Submit a copy of any picture ID (driver’s license, passport, work related ID cards or similar documentation). If the picture ID does not have your Social Security Number listed, please provide other documentation such as a copy of your social security card, paycheck stub or bank statement.**
9. **Form RD 3550-4 Employment and Asset Certification**

If you need assistance filling out the above forms or have any questions, feel free to contact our office at 715-232-2614 extension 4.

Rural Development Staff
Menomonee Area Office

“The USDA is an equal opportunity provider and employer.”

What you are applying for: Loan assistance to make essential home repairs for very-low income home owners and grant and loan assistance for elderly, very-low income homeowners. Loan and grant funds can be used to weatherization purposes, electrical work, structural repairs, or other essential repairs.



Terms: Repair Grant Program:

Must be repaid if the property is sold or transferred within three years of receiving the grant, otherwise, no repayment is required.

Maximum lifetime grant is: \$7,500.

Repair Loan Program:

One percent interest (1%) and up to 20 year Repayment period. Maximum loan is \$20,000.

Eligibility:

1. Grant recipients must be 62 years of age or older. There are no age restrictions to receive a loan.
2. Income limits apply. Adjusted annual income must be classified as “very low income” for their family size. Please call our office for the income limits.
3. Applicants must be unable to obtain financial assistance from other sources or lack the financial resources to complete the needed repairs. They must have less than \$7,500 of liquid assets (\$10,000 if age 62 or older).
4. Loan applicants must have an acceptable credit history and sufficient dependable income to repay the loan.
5. Applicants must own and occupy the single family dwelling they want to repair. If it is a manufactured home, the applicants must own the piece of land it sets on.

504

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 Acquired	Original Cost \$	Amount Existing Liens \$	(a) Present Value of Lot \$	(b) Cost of Improvements \$	Total (a + b) \$
					0.00
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
Source of Down Payment, Settlement Charges and/or Subordinate Financing (Explain)					<input type="checkbox"/> Leasehold (Show expiration date)

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	Name & Address of Employer	<input type="checkbox"/> Self-Employed	Yrs./Mos. on the job
		Yrs/Mos. employed in this line of work/profession			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)	
<i>If employed in current position for less than two years or if currently employed in more than one position, complete the following:</i>					
Name & Address of Employer	<input type="checkbox"/> Self-Employed	Dates (From > To)	Name & Address of Employer	<input type="checkbox"/> Self-Employed	Dates (From > To)
		Monthly Income			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)	Name & Address of Employer	<input type="checkbox"/> Self-Employed	Dates (From > To)
		Monthly Income			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*	\$	\$	\$ 0.00	Rent	\$	
Overtime			0.00	First Mortgage (P&I)		\$
Bonuses			0.00	Other Financing (P&I)		
Commissions			0.00	Hazard Insurance		
Dividends/Interest			0.00	Real Estate Taxes		
Net Rental Income			0.00	Mortgage Insurance		
Other (Before completing see the notice in "describe other income," below			0.00	Homeowner Assn. Dues		
			0.00	Other		
Total	\$ 0.00	\$ 0.00	\$ 0.00	Total	\$ 0.00	\$ 0.00

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

A1/A2	Describe Other Income <small>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.</small>	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	Monthly Payment & Months Left to Pay
Cash deposit/purchase held by:	\$		
<i>List checking and saving accounts below</i>			
Name and Address of Bank, S&L, or Credit Union		Acct. No.	Unpaid Balance
		Name and Address of Company	\$ Payment/Months
Acct. No.	\$		\$
Name and Address of Bank, S&L, or Credit Union			
		Acct. No.	
		Name and Address of Company	\$ Payment/Months
Acct. No.	\$		\$
Name and Address of Bank, S&L, or Credit Union			
		Acct. No.	
		Name and Address of Company	\$ Payment/Months
Acct. No.	\$		\$
Name and Address of Bank, S&L, or Credit Union			
		Acct. No.	
		Name and Address of Company	\$ Payment/Months
Acct. No.	\$		\$
Name and Address of Bank, S&L, or Credit Union			
		Acct. No.	
		Name and Address of Company	\$ Payment/Months
Acct. No.	\$		\$
Stocks & Bonds (Company name/number & description)	\$		
	\$		
	\$		
	\$		
	\$		
Life insurance net cash value	\$		
Face amount: \$	\$		
Subtotal Liquid Assets	\$		
Real estate owned (Enter market value from schedule of real estate owned)	\$		
		Acct. No.	
Vested interest in retirement fund	\$	Name and Address of Company	\$ Payment/Months
Net worth of business(es) owned (Attach financial statement)	\$		\$
Automobiles owned (Make and year)	\$		
	\$		
	\$		
	\$		
Other Assets (Itemize)	\$	Acct. No.	
	\$	Alimony/Child Support/Separate Maintenance Payments Owed to:	\$
	\$	Job Related Expense (Child care, union dues, etc.)	\$
	\$		
	\$	Total Monthly Payments	\$
Total Assets a.	\$	Net Worth (a minus b) \$	Total Liabilities b. \$

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 this 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
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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 (Print or type)		Name and Address of Interviewer's Employer
	Interviewer's Signature	Date	
	Interviewer's Phone Number (Incl. Area Code)		

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

APPLICANT #2

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

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

7. 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: Yes No

Lack complete plumbing Physically deteriorated or structurally unsound

Lack adequate heating Overcrowded (More than 2 persons per room)

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 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 applications 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 _____
 _____ **X** _____
 Date _____ Signature of Applicant _____
 _____ **X** _____

17. Date	Signature of Loan Approval Official	Determination of Eligibility <input type="checkbox"/> Eligible <input type="checkbox"/> Not Eligible	Racial Data Provided by <input type="checkbox"/> Applicant <input type="checkbox"/> 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)).



United States Department of Agriculture
Rural Development
Menomonie Area Office

HOUSEHOLD INFORMATION SHEET

- List all persons who will be living in the home to be purchased and/or repaired:

NAME

DATE OF BIRTH

Applicant

Co-Applicant

Family members:



- Have you or the co-applicant ever been married before?
 - YES _____ (If yes, please submit a copy of your final divorce decree.)
 - NO _____
- Have you and/or the co-applicant ever filed bankruptcy?
 - YES _____ (If yes, please submit a copy of your discharge of debtor paper.)
 - NO _____
- Do you receive food stamps?
 - YES _____ (If yes, how much per month?) _____
 - NO _____
- Do you receive fuel assistance?
 - YES _____ (If yes, how much did you receive last year?) _____
 - NO _____
- Do you receive Earned Income Credit paid thorough your employer?
 - YES _____
 - NO _____

390 Red Cedar St., Suite G, Menomonie, WI 54751
Phone: (715) 232-2614t. 4 • Fax: (715) 233-3210 .www.rurdev.usda.gov/wi

Committed to the future of rural communities.

"USDA is an equal opportunity provider, employer and lender."

To file a complaint of discrimination write USDA, Director, Office of Civil Rights, Room 326-W, Whiffen Building, 14th and Independence Avenue, SW, Washington, DC 20250-9410 or call (202) 720-5964 (voice or TDD).

United States Department of Agriculture
Rural Development
Rural Housing Service

AUTHORIZATION TO RELEASE INFORMATION

TO: _____

RE: _____
Account or Other Identifying Number

Name of Customer

I, and/or adults in my household, have applied for or obtained a loan or grant from the Rural Housing Service (RHS), part of the Rural Development mission area of the United States Department of Agriculture. As part of this process or in considering my household for interest credit, payment assistance, or other servicing assistance on such loan, RHS may verify information contained in my request for assistance and in other documents required in connection with the request.

I, or another adult in my household, authorize you to provide to RHS for verification purposes the following applicable information:

- Past and present employment or income records.
- Bank account, stock holdings, and any other asset balances.
- Past and present landlord references
- Other consumer credit references.

If the request is for a new loan or grant, I further authorize RHS to order a consumer credit report and verify other credit information.

I understand that under the Right to Financial Privacy Act of 1978, 12 U.S.C. 3401, *et seq.*, RHS is authorized to access my financial records held by financial institutions in connection with the consideration or administration of assistance to me. I also understand that financial records involving my 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 or used for another purpose without my consent except as required or permitted by law.

This authorization is valid for the life of the loan.

The recipient of this form may rely on the Government's representation that the loan is still in existence.

The information RHS obtains is only to be used to process my request for a loan or grant, interest credit, payment assistance, or other servicing assistance. I acknowledge that I have received a copy of the Notice to Applicant Regarding Privacy Act Information. I understand that if I have requested interest credit or payment assistance, this authorization to release information will cover any future requests for such assistance and that I will not be renotified of the Privacy Act information unless the Privacy Act information has changed concerning use of such information.

A copy of this authorization may be accepted as an original.

Your prompt reply is appreciated.

Signature (Applicant or Adult Household Member)

Date

According to the Paperwork Reduction Act of 1995, no persons 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 5 minutes 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.

RHS Is An Equal Opportunity Lender

SEE ATTACHED PRIVACY ACT NOTICE

United States Department of Agriculture
Rural Development
Rural Housing Service

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TO: _____

RE: _____
Account or Other Identifying Number

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RHS Is An Equal Opportunity Lender

SEE ATTACHED PRIVACY ACT NOTICE

United States Department of Agriculture
Rural Housing Service

EMPLOYMENT AND ASSET CERTIFICATION

EMPLOYMENT CERTIFICATION

Check the appropriate blocks and account for all adult household members by listing their or your name under the applicable statement:

I hereby certify that the following adult household members are not presently employed and do not intend to resume employment in the foreseeable future:

I hereby certify that the following adult household members are not presently employed but are actively seeking employment. I agree to notify RHS immediately when they become reemployed:

I hereby certify that the following adult household members are currently employed. I agree to notify RHS should their employment status change:

ASSET CERTIFICATION

Check the appropriate blocks and account for all household member's (adults and children) assets, which include but are not limited to savings accounts, stocks, bonds, Treasury bills, savings certifications, money market funds, investment accounts, equity in real property, revocable trust funds that are available to the household, lump-sum receipts, personal property held as an investment, cash value of life insurance policies, and amounts in voluntary retirement plans that can be withdrawn:

I hereby certify that our household's combined net assets do or do not exceed \$5,000 and that all assets were listed on Form RD 410-4, "Uniform Residential Loan Application."

According to the Paperwork Reduction Act of 1995, no persons 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 5 minutes 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.

I hereby certify that within the past two years, I have or have not disposed of assets for less than the fair market value through a sale or a gift. If "have" is marked, provide the following pertinent information.

Asset	Disposition Date	Value of Asset	Amount Received
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
0.00	_____	_____	_____

 APPLICANT

 Date:

 APPLICANT

 Date:

 APPLICANT

 Date:

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."

Form RD 1944-3
(Rev. 6-97)

BUDGET AND/OR FINANCIAL STATEMENT

1. NAME OF APPLICANT/BORROWER:	2. HOME PHONE NUMBER:	3. AGES OF PERSONS IN HOUSEHOLD:
4. NAME OF CO-APPLICANT/CO-BORROWER:	5. WORK PHONE NUMBER:	Applicant/Borrower: _____ Children: _____ Co-Applicant/Co-Borrower: _____ Others _____
6. ADDRESS:		7. PERIOD COVERED BY PLAN: _____ 20____ thru _____ 20____

BUDGET

PART 1 - PLANNED EXPENSES AND PAYMENTS

A - CASH EXPENSES	MONTHLY	NEXT 12 MONTHS	B - DEBT PAYMENTS	MONTHLY	NEXT 12 MONTHS
FOOD:	\$	\$	HOUSE PAYMENT:		
CLOTHING:			CAR/TRUCK:		
MEDICAL: <i>(Doctor, dentist, eyeglasses, medication, etc.)</i>			CAR/TRUCK:		
PERSONAL: <i>(Beauty shop, barber, liquor, cigarettes, newspapers, magazines, etc.)</i>			OTHER VEHICLES AND EQUIPMENT:		
HOUSEHOLD:			OTHER: <i>(Credit cards, medical, installment loans, personal debts, other real estate etc.)</i> (LIST)		
FUEL:					
ELECTRICITY:			FEDERAL DEBTS:		
TELEPHONE:					
CABLE TV:					
WATER AND/OR SEWER:					
OTHER:			PLANNED CREDIT PURCHASES: <i>(Furniture appliances, etc.)</i>		
HOME REPAIR AND MAINTENANCE: <i>(Appliances, paint, yard, etc.)</i>					
EDUCATION: <i>(Tuition, books, supplies, fees, school lunches, etc.)</i>			TOTAL DEBT PAYMENTS:	\$ 0	\$ 0

PART 2 - HOUSEHOLD INCOME

APPLICANT/BORROWER: <i>(Wages, tips, overtime, etc.)</i>		
CO-APPLICANT/CO-BORROWER: <i>(Wages, tips, overtime, etc.)</i>		
NET BUSINESS INCOME:		
OTHER: <i>(Social Security, retirement, alimony, child support, VA, Public assistance, other income, etc.)</i>		
TOTAL HOUSEHOLD INCOME:	\$ 0	\$ 0

PART 3 - SUMMARY

TAXES:			A. TOTAL INCOME (PART 2)	\$	\$
REAL ESTATE:			B. CASH <i>(Checking, savings, etc.)</i>		
INCOME:			C. TOTAL EXPENSES AND DEBT PAYMENTS (PART 1A + 1B)		
SOCIAL SECURITY:			D. BALANCE (A + B - C)	\$	\$
PERSONAL PROPERTY:			SIGNATURE OF APPLICANT/BORROWER		DATE
UNION OR PROFESSIONAL DUES:			SIGNATURE OF CO-APPLICANT/CO-BORROWER		DATE
CHILD CARE: <i>(Daycare, babysitting, etc.)</i>			SIGNATURE OF AGENCY OFFICIAL <i>(I have reviewed this budget and it appears to be a reasonable projection of income and expenses)</i>		DATE
CHILD SUPPORT/ALIMONY: <i>(Paid out)</i>					
PLANNED CASH PURCHASES: <i>(Furniture, appliances, etc.)</i>					
LOAN CLOSING COSTS: <i>(Not included in loan)</i>					
MOVING EXPENSES:					
OTHER:					
TOTAL CASH EXPENSES	\$ 0	\$ 0			

According to the Paperwork Reduction Act of 1995, no persons 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 0375-0172. The time required to complete this information collection is estimated to average 30 minutes 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.

NOTICE TO HOME LOAN APPLICANT

Pursuant to FACT Act, Section 212.

In connection with your application for a home loan, Rural Development must disclose to you the score that a credit bureau distributed to the Agency and was used in connection with your home loan, as well as key factors affecting your residential mortgage credit score.

The credit score is a computer-generated summary calculated at the time of the request and based on the information a credit bureau has on file. The scores are based on data about your credit history and payment patterns. Credit scores are important because they are used to assist the Agency in determining whether you will obtain a loan. Credit scores can change over time, depending on your conduct, how your credit history and payment patterns change, and how credit scoring technologies change.

Because the score is based on information in your residential mortgage credit history, it is very important that you review the credit-related information to make sure it is accurate. Credit records may vary from one company to another.

If you have any questions, about your score or the credit information that is furnished to you, contact the credit bureau at the address and telephone number provided with this notice. The credit bureaus play no part in the decision to take any action on the loan application and are unable to provide you with specific reasons for the decision on the loan application.

If you have any questions concerning the terms of the loan, contact Rural Development.

THIS DISCLOSURE HAS BEEN PROVIDED TO THE ELIGIBLE APPLICANT(S) PURSUANT TO SECTION 212 OF THE FAIR AND ACCURATE CREDIT TRANSACTIONS ACT OF 2003. I UNDERSTAND THAT I MAY RECEIVE A COPY OF MY RESIDENTIAL MORTGAGE CREDIT REPORT BY MAKING A WRITTEN REQUEST TO THE RURAL DEVELOPMENT OFFICE HANDLING MY LOAN APPLICATION.

CREDIT SCORE DISCLOSURE

In accordance with the Fair and Accurate Credit Transactions Act of 2003 (FACT Act) and in connection with your application for a Rural Development Single Family Housing (hereafter referred to as "the Agency") home loan, the Agency, upon request, must disclose to you the score that a credit bureau distributes to users and will be used by the Agency in connection with your home loan as well as the key factors affecting your credit scores.

While the Agency does not consider credit scores in determining adverse credit decisions, we may use them to presume acceptable credit in lieu of other credit underwriting practices. Credit scores assist lenders in evaluating your credit history in a more expedient and objective manner. Your credit scores are found on your residential mortgage credit report, a copy of which will be provided to you upon request. The range of possible scores is from 0 to 850. The Agency may also obtain and consider other credit scores in making its decision on your application from the credit bureaus listed below.

In addition to the credit scores, your credit report lists the key factors related to why your scores were less than the maximum possible score. Please keep in mind that the factors are only indicators of why you received less than the maximum score possible. The listing of these factors does not by itself indicate that you would not be approved for the loan you have requested. Rural Development considers many factors in addition to your credit scores in making a decision on your application. If your application is not approved, you will receive a separate notice stating the specific reason(s) for that action which may or may not relate to your credit scores.

The Agency did not calculate your credit scores or develop the scoring models. If you have any questions about your credit scores or the information in the residential mortgage credit report from which the scores were computed, you can contact the credit bureau at the address listed below.

CBCInnovis, Inc.
8 Parkway Center
Pittsburgh, Pennsylvania 15220
(877) 237-8317

NOTIFICATION TO APPLICANT/TENANT ON
IMPLEMENTATION OF WAGE/BENEFIT MATCHING

In addition to direct verification of all income coming into the household, Rural Development will verify income of each adult applicant or tenant with the Wisconsin Department of Workforce Development (DWD).

The goal of the system is to prevent the potential for fraud, waste, and abuse of Federal benefits. This notice is to inform you about the program and how it may affect you.

Since April 20, 1995, Rural Development has had the capability to review wage and benefit information from the DWD for comparison with information provided on your most current income statement(s). This information will be compared against the income statement(s) provided by you and adult members of your household.

Rural Development assumes that income statements are completed as accurately as possible, although errors do occur. There are also those who report erroneous or incomplete information in order to qualify for Federal benefits.

Should a review of DWD data reveal a discrepancy, contact with you will normally be made to solicit added information to account for discrepancies or to correct errors. The intent of Rural Development is not to harass you, but merely to resolve discrepancies and/or errors as early as possible. The agency may also look at your past certifications in an attempt to recover any improper assistance which may have been delivered in past years.

When unauthorized assistance has been granted, Rural Development must make an attempt to collect from you the sum which is determined to be unauthorized, regardless of the amount. The reimbursement may be collected by a lump sum, in a monthly amount added to your scheduled payment, or serviced as an unauthorized assistance account.

If you have any further questions, contact the Rural Development office that services your area.

Information Release Authorization Statement

"I authorize Rural Development to release any information regarding my employment, wages/earnings, and unemployment claims/benefits that they have obtained from the State of Wisconsin Department of Workforce Development (DWD) to any and/or manager of a rental unit which I am currently renting/leasing or for which I have completed a rental contract/lease agreement application."

Name (Print)

Social Security Number

Street Address (Print)

City, State and Zip Code (Print)

Signature

Date

Co-Applicant
Name(Print)

Social Security Number

Signature

Date