

Instructions for FSA-2212

PREFERRED LENDER APPLICATION FOR GUARANTEE

Lenders under the Preferred Lender Program (PLP) use this form to apply for an FSA loan guarantee. Loan applicants should **not** submit this form to FSA. This form is submitted to FSA by lenders after the lender has recorded the required information.

Lenders submit the original of the completed form in hard copy or facsimile to the appropriate USDA servicing office.

Lenders who have established electronic access credentials with FSA may electronically transmit this form to the USDA servicing office. The application will be processed; however, the original, signed copy of the form must be submitted to the local servicing office before FSA can issue a loan guarantee. Features for transmitting the form electronically are available to those customers with access credentials only. If you would like to establish online access credentials with FSA, follow the instructions provided at the USDA eForms web site.

Loan applicants who have not already provided the requested information to their lender must complete Items 1 through 24. Items 25A through 26B are required. Items 45 through 47 are voluntary.

Lenders must complete Items 27 through 44.

Items 1-24 Part A-Loan Applicant Information

Fld. Name/ Item No.	Instruction
1 Applicant's Name	Enter applicant's complete name.
2 Co- Applicant's Name	Enter co-applicant's complete name.
3 Applicant's Telephone Number	Enter applicant's home or business telephone number, including area code.
4 Applicant's Address	Enter applicant's complete mailing address, including physical address if different from mailing address.
5 Applicant's SSN or Tax ID Number	Enter applicant's social security number or tax ID number.

Fld. Name/ Item No.	Instruction
6 Applicant's Birth Date	Enter applicant's date of birth.
7 Co- Applicant's Birth Date	Enter co-applicant's date of birth.
8 Co- Applicant's Social Security Number	Enter co-applicant's social security number, or tax ID number.
9 Total Number of Household Members	Enter the total number of persons living in the applicant's household.
10 Type of Operation	Select appropriate entity type that applies to the applicant.
11 Acres Owned	Enter total number of acres currently owned.
12 Acres Rented	Enter total number of acres currently rented.
13 Marital Status	Check the appropriate box for marital status.
14 Have you or any member of the ...	Check "YES" if you or any member of the entity obtained a direct or guaranteed loan from FSA or other USDA agencies. If not, check "NO."

Fld. Name/ Item No.	Instruction
15 If you answered "YES" ...	<p>Check "YES" if you previously had an FSA direct or guaranteed loan that was paid in full. If you are currently an FSA direct or guaranteed loan borrower, check "NO" and enter active "borrower" in the space provided.</p> <p>Check "NO" and provide an explanation if you previously had an FSA farm loan which:</p> <ol style="list-style-type: none"> (1) Was not paid in full, and/or (2) You were released from personal liability as part of a debt settlement for a direct or guaranteed FSA loan, and/or (3) The government ever paid a loss claim to a Lender under a guaranteed loan.
16 Have you or any member of the ...	Check "YES" if you or any member of the entity ever been in receivership, been discharged in bankruptcy, or filed for bankruptcy. Otherwise check "NO."
17 If "YES" ...	If you answered "YES" to item 16, provide details.
18 Are you or any member of the ...	<p>Check "YES" if you or any member of the entity delinquent on any debt to the U.S. Government. Otherwise check "NO."</p> <p>Debt to the United States Government includes but is not limited to education loans, obligations to the Commodity Credit Corporation, Natural Resources Conservation Service, Veterans Administration, FSA, Rural Housing Service or Federal Crop Insurance Corporation/Risk Management Agency.</p>
19 Are you ...	Check "YES" if you or the majority of members of the entity are citizens of the United States. Otherwise check "NO."
20 If "NO" ...	<p>If you answered "NO" to item 19, "Check "YES" if you are a non-citizen national, or a qualified alien. Otherwise check "NO."</p> <p><i>(Please provide documentation.)</i></p>
21 Are you a veteran?	Check "YES" if you are a veteran and indicate branch and dates of service. If not, check "NO."
22 Are you an employee ...	Check "YES" if you are an employee, related to an employee, or an associate of an employee of the lender or FSA. Otherwise check "NO."

Fld. Name/ Item No.	Instruction
23 Are you farming or ranching now?	If you are currently farming enter "YES" and indicate the number of years. If not, check "NO." The years counted should be years that you or any entity in which you were an owner, reported income or loss from farming to the Internal Revenue Service. If there is more than one applicant, the number should be the greatest number calculated for any one applicant.
24 If you answered "NO" ...	If you answered "NO" to Item 23, but you have operated a farm in the past, list dates. The years counted should be years that you or any entity in which you were an owner, reported income or loss from farming to the Internal Revenue Service. If there is more than one applicant, the number should be the greatest number calculated for any one applicant.

Items 25A-26B - Part B Loan Applicant Certifications

Fld. Name/ Item No.	Instruction
Certifications	Please read the statements in this section carefully before signing.
25A Applicant's Signature	Enter signature of applicant.
25B Date	Enter the current date the applicant signed.
26A Co-Applicant's Signature	Enter signature of co-applicant, if applicable.
26B Date	Enter the current date the co-applicant signed the form.

Items 27-32 - Part C Type of Assistance Requested (To Be Completed By Lender)

Fld. Name / Item No.	Instruction
27 Purpose(s) Of Loan	Enter purpose(s) of loan.
28 Interest Rate	Enter the rate of interest the loan applicant will be charged and check the appropriate box if the rate is "Fixed" or "Variable."
29 Interest Assistance Requested	Check "YES" if interest assistance is requested. Otherwise check "NO."
30 Repayment Period	Enter the repayment period (years) for the loan requested.
31 Loan Type	Check the appropriate box for the type of loan the applicant is requesting.
32 Loan Amount or LOC Ceiling	Enter the amount of loan request or the line-of-credit (LOC) ceiling.

Items 33-36 - Part D Proposed Security (To Be Completed By Lender)

Fld. Name/ Item No.	Instruction																									
33-36	<p>Enter specific security information for each field.</p> <p>Example:</p> <p><u>OL Request for Guarantee</u></p> <table border="1"> <thead> <tr> <th><u>Item Description</u></th> <th><u>Lien Position</u></th> <th><u>Est. Value</u></th> <th><u>Amount of Prior Lien</u></th> <th><u>Collateral Value</u></th> </tr> </thead> <tbody> <tr> <td>Crops</td> <td>1st</td> <td>\$ 96,000</td> <td>\$0</td> <td>\$ 96,000</td> </tr> <tr> <td>Machinery</td> <td>2nd</td> <td>\$ 82,000</td> <td>\$50,000</td> <td>\$ 32,000</td> </tr> <tr> <td>Beef Calves</td> <td>1st</td> <td><u>\$200,000</u></td> <td><u>\$0</u></td> <td><u>\$200,000</u></td> </tr> <tr> <td>Totals</td> <td></td> <td>\$378,000</td> <td>\$50,000</td> <td>\$328,000</td> </tr> </tbody> </table>	<u>Item Description</u>	<u>Lien Position</u>	<u>Est. Value</u>	<u>Amount of Prior Lien</u>	<u>Collateral Value</u>	Crops	1 st	\$ 96,000	\$0	\$ 96,000	Machinery	2 nd	\$ 82,000	\$50,000	\$ 32,000	Beef Calves	1 st	<u>\$200,000</u>	<u>\$0</u>	<u>\$200,000</u>	Totals		\$378,000	\$50,000	\$328,000
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Items 37-41 - Part E Environmental Information (To Be Completed By Lender)

Fld. Name/ Item No.	Instruction
37-41 Environmental Information	Lenders shall carefully consider questions 37 through 41 and respond with the appropriate answers for the farm operation proposed for loan guarantee by FSA. If the lender has questions regarding these issues the FSA Farm Loan Manager at the local USDA Service Center should be contacted for assistance. Lenders have to do site visit to operation and conduct environmental reviews as applicable.
37 Floodplains	Check "YES" if the real estate is located within the 100-year floodplain. Otherwise check "NO." If "YES" please provide an explanation and attach it to this form.
38 State Water Quality Standards	Check "YES" if the operation may violate State Water Quality Standards. Otherwise check "NO." If "YES" please provide an explanation and attach it to this form.
39 Historical and Archaeo- logical Sites	Check "YES" if the operation may violate State Water Quality Standards. Otherwise check "NO." If "YES" please provide an explanation and attach it to this form.
40 Wetlands and HEL	Check "YES" if loan funds will effect any Wetlands and Highly Erodible Land. Otherwise check "NO." If "YES" please provide an explanation and attach it to this form.
41 Hazardous Substances	Check "YES" if lenders have to do site visit to the operation and conduct environmental reviews as applicable. Otherwise check "NO." If "YES" provide an explanation and attach it to this form.

Items 42-44 - Part F Lender's Information and Certification (To Be Completed By Lender)

Fld. Name/ Item No.	Instruction
42 Lender's Name, Address, & Telephone Number	Enter Lender's name, complete mailing address with zip code and Telephone Number with area code.
43A Official's Name	Enter name of the official authorized to execute official binding documents on the lender's behalf.
43B Official's Title	Enter title of the official authorized to execute official binding documents on the lender's behalf

Fld. Name/ Item No.	Instruction
44A Official's Signature	<p>Enter the signature of the official whose name/title appears in Item 43 and the date the application was signed. The lender should promptly submit the completed application to FSA for consideration.</p> <p>If you are mailing or faxing this form, print the form and manually enter your signature. If this form is approved for electronic transmission and you have established credentials with FSA to submit forms electronically, use the buttons provided on the form for transmitting the form to the USDA servicing office.</p>
44B Date	Enter the date the application was signed.

Items 45-47 - Part G Voluntary Information for Monitoring Purposes (For Voluntary Completion By Applicant)

Fld. Name/ Item No.	Instruction
45 Ethnicity	Check the appropriate box indicating your ethnicity.
46 Race	Check the appropriate box or boxes indicating your race.
47 Gender	Check the appropriate box indicating your gender.

Items 48A and 48B for FSA use only.