## **Instructions for FSA-2222**

### **REQUEST FOR INTEREST ASSISTANCE PAYMENT**

This form is used by an FSA Guaranteed Lender to request periodic interest assistance payments for Guaranteed Farm Loans that have an Interest Assistance Agreement in effect.

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

Customers who have established electronic access credentials with FSA may electronically transmit this form to the FSA servicing office, <u>provided</u> that (1) the customer submitting the form is the only person required to sign the transaction, or (2) the customer has an approved Power of Attorney (Form FSA-211) on file with FSA to sign for other customers for the program and type of transaction represented by this form.

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 USDA, follow the instructions provided at the USDA eForms web site.

#### Lenders must complete Items 1 through 13 and Items 16-25C.

Fld Name / Item No.	Instruction
1A - C Borrower's Case Number	Enter the borrower's FSA case number. (The borrower's FSA case number is their state and county code and the borrower's social security number or IRS tax identification number.)
	Item 1A. Enter the two-digit state code. Item 1B. Enter the three-digit county code.
	Item 1C. Enter the Borrower's Social Security Number or Tax Identification Code.
2 Borrower's Name	Enter the borrower's last name, first name, then middle initial, in that order. You may abbreviate if space is insufficient
3 Lender's Name	Enter the lender's name.

Items 1-13

Fld Name / Item No.	Instruction
4 Lender's Tax ID Number	Enter the lender's IRS tax identification number.
5 Branch Number	Enter the lender's FSA branch number. This number is assigned by FSA based on the number of the lender's branches that make and service FSA guaranteed loans.
6 FSA Loan Number	Enter FSA-assigned loan number. FSA guaranteed loans are numbered starting with loan 50 for the first one received by the borrower and consecutively thereafter, such as 51, 52, etc.
7 Original Loan Amount	Enter the original loan dollar amount.
8 Beginning Claim Period	Enter the beginning date of the current interest assistance period. (Example: The interest assistance closing date is 05-04-1998; initial request beginning date is 05-04-0000; subsequent requests will begin with the ending date on the previous request for payment.)
9 End Claim Period	Enter the ending date of the current interest assistance period. The ending date on this request equals the beginning date on the next request.
	<b>NOTE:</b> Interest assistance claims may only be submitted for a 12-month period unless it is the first or last claim. If the Loan Guarantee terminates, or a transfer and assumption occurs, the interest assistance should be claimed up to that date. In the case of assumptions to eligible transferees, the beginning date on the transferred loan is the assumption date; and the initial claim may be at any time with future claims at 12-month intervals, except as described above.
10 Principal Balance at End of Claim Period	Enter the principal dollar balance of the loan at the end of the claim period.

Fld Name / Item No.	Instruction
11 Average Daily Principal Balance During Claim Period	Enter the average daily principal dollar balance for the claim period. Contact FSA if you have questions about how the average daily principal balance is calculated.
12 Interest Payable	Enter the interest payable dollar amount on the loan as of the date in Item 9. <b>NOTE:</b> ALL INTEREST CALCULATIONS ON THIS FORM ARE BASED ON THE BORROWER'S EFFECTIVE INTEREST RATE.
13 Final Payment	Indicate final payment by entering "1" for " <b>Yes</b> " if this is the last IA payment due on the loan, and "2" for " <b>No</b> " if it is not the last payment on the loan.

# Items 14 and 15 to be completed by FSA only

#### Items 16-26

Fld Name / Item No.	Instruction
16 Lender's	Enter the lender's electronic fund transfer routing number for electronic funds transfer (EFT).
Electronic Fund Transfer	
(EFT)	
17 Lender's Deposit Account Number for EFT	Enter the lender's deposit account number for EFT.
18 Type of account	Check the type of account for deposit of funds by EFT. Enter a checkmark in the checkbox for the savings <b>or</b> checking account.

Fld Name / Item No.	Instruction
19 Beginning Date	Enter the beginning date for the next interest assistance period. This should equal and or be the same as the ending date of the previous interest assistance period.
20 Ending Date	Enter the ending date of the next interest assistance period. This is exactly 12 months from the beginning date unless the claim qualifies as a partial year claim.
21 Percent of Assistance Requested Next Period	Enter 4 percent or zero, as appropriate, based on whether the borrower is eligible for interest assistance or not.
22 Terminate Interest Assistance	Enter the applicable code. Enter "1" for " <b>Yes</b> " if the agreement is not required or has matured. Enter "2" for " <b>No</b> " if the agreement has not matured and you want it to continue.
Agreement	<b>NOTE:</b> IF YES IS ENTERED THE ASSISTANCE FUNDS FOR THE REMAINING LIFE OF THE AGREEMENT ARE DE- OBLIGATED.
	A new request, approval, obligation and agreement will be required if interest assistance is needed on this loan in the future.
23 Effective Date of Interest Assistance Termination	Enter the effective date of the interest assistance termination. Complete only if "1" was entered in Item 22. Leave blank if "2" was entered in Item 22.
24 Reason for	Leave blank if no entry was made in Item 23. Enter the reason for termination code.
Termination Code	01 = Borrower is no longer eligible for interest assistance. 02 = Loan is paid in full.
25 Lender's Certifica- tion	Read and understand this statement before signing the form.

Fld Name / Item No.	Instruction
25A - C Authorized	Item 25A. Record the signature of the authorized lender's representative.
Lender's	representative.
Signature,	Item 25B. Enter the title of the person who signed Item 25A.
Title, and Date	Item 25C. Enter the date the authorized lender's representative signed the form.
	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 USDA to submit forms electronically, use the buttons provided on the form for transmitting the form to the USDA servicing office.

Items 26 through Item 28 to be completed by FSA only.