This form is quailable -	loctronically		(Can Dar	Form Approve e 3 for Privacy Act and Pu	ed - OMB No. 0560-0236
This form is available e FSA-2489	lectronically.	U.S. DEPARTMENT O	· · · · · ·	e 3 IOF PHVACY ACT and Pu	Position 2
(09-03-10)		Farm Service			
		ASSUMPTION	AGREEMENT		
PART A - GENERAL					
1. Full Case Number	of Assuming Party (ST	CO/9 digits SSN/TIN)			
0					
2A. Type of Loan				2B. Type of Security	
OL FO EM EE SW CL Regular Limited Resource Non-Program			L	Real Estate	Chattels
3A. Transferee Eligibi	ility	3B. Amount of Transfer		3C. Release of Liability	
\Box (1) Eligible - Same rates and terms		(1) Transfer for full amount of debt		(1) Transferor released from personal liability	
(2) Eligible - Ne (3) Ineligible tra	w rates and terms nsferee	(2) Transfer for less than full amount of debt		(2) Transferor not released from personal liability	
PART B - AGREEME	NT			personal	liability
			• • • •		
	EMENT dated (a) _		is between the	United States Departm	ient of Agriculture,
acting through the Far	rm Service Agency ("C	Government,") and (b)			
("assuming parties"), v	whose address is (c)				
5. BECAUSE	Government is the hol	der of loans evidenced	by certain debt instrun	nents executed by the p	resent debtor
(a)		, case numl		· · ·	dentified as follows
in Item 6.		, cube mann		,	
6. DEBT INSTRUME					
<i>(a)</i> Fund Code	<i>(b)</i> Date Executed	(c) Original Amount		d Balance	(e) Interest Rate
and Loan Number			(1) Principal	(2) Interest	
applicable, sex, marital statu income is derived from any p	is, familial status, parental sta public assistance program. (I	crimination in all of its programs atus, religion, sexual orientatior Not all prohibited bases apply t t, audiotape, etc.) should conta	n, political beliefs, genetic info o all programs.) Persons witi	ormation, reprisal, or because h disabilities who require alter	all or part of an individual's native means for

To file a complaint of discrimination, write to USDA, Assistant Secretary for Civil Rights, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, S.W., Stop 9410, Washington, DC 20250-9410, or call toll-free at (866) 632-9992 (English) or (800) 877-8339 (TDD) or (866) 377-8642 (English Federal-relay) or (800) 845-6136 (Spanish Federal-relay). USDA is an equal opportunity provider and employer.

Initial: _____ Date: _____

FSA-2489 (09-03-10)

7. BECAUSE in connection with such loans the following-described security instruments were taken on property described

County, State of (*b*)

______ , and identified as follows in Item 8.

8. SECURITY INSTRUMENT DATA				
(a) Instrument	<i>(b)</i> Date Executed	(c) Office Where Recorded or Filed	<i>(d)</i> Book, Volume, or Document	<i>(e)</i> Page
9. THEREFORE , in consideration of the assumption of indebtedness as herein provided, and the Government's consent to such assumption and to any accompanying conveyance or transfer of security property to the assuming parties, it is agreed as follows:				
The assuming parties bereby jointly and severally assume liability for and agree to pay to the order of the Government, the				

The assuming parties hereby jointly and severally assume liability for and agree to pay to the order of the Government, the amounts, and on the dates specified in the following checked block:

A. \Box THE SUM OF (1)

	dollars (2) (\$), plus INTEREST on the	UNPAID PRINCIPAL at the
rate of (3)		PERCENT , (4) (%) PER ANNUM,
in (5)		installments due and	payable as follows in Item 9C.	
B. Of the e	entire unpaid indebtedness	s under said debt and s	security instruments, THE SUM (DF (1)
			dollars (2) (\$)
principal, with INTER	EST thereon at the rate of	f (3)	PERCENT, (4)	%
PER ANNUM from th	e date hereof, plus (5)			
dollars (6) (\$) accr	ued interest as of the o	late hereof, without interest thereo	on, which accrued interest is
included in the first ins	tallment written below in	Item 9C.		
C. The princi	pal and interest shall be d	ue and payable as foll	ows:	
(1) Installment Ar	nount	<i>(2)</i> Due Date	(1) Installment Amount	(2) Due Date
and (3) \$	thereafter on	(4)	of each (5)	until the
indebtedness hereby as shall be due and payabl		the final installment o	f the entire indebtedness evidence	ed hereby, if not sooner,
(6)	; (7)	years from	the date of the original loan being	g assumed; or,
(8)	; (9)	years from	the date of this assumption.	

Prepayments of scheduled installments, or any portion of these installments, may be made at any time at the option of the borrower. Refunds and extra payments shall, after payment of interest, be applied to the last installments to become due under this note and shall not affect the obligation of the borrower to pay the remaining installments as scheduled in this assumption agreement. 10. Payments shall be applied in accordance with FSA regulations.

11. If this assumption evidences a limited resource loan, Government may **CHANGE THE RATE OF INTEREST** in accordance with the regulations of the Government by giving the borrower thirty (30) days prior written notice at the borrower's last known address.

12. The provisions of said debt security instruments, and of any outstanding agreements executed or assumed by the present debtors pertinent thereto, shall except as modified herein, remain in full force and effect, and the assuming parties hereby assume the obligations of and agree to be bound by and to comply with all covenants, agreements and conditions contained in said instruments and agreements, except as modified herein, the same as if they had executed them as of the dates thereof as principal obligors. Any provisions of the debt and security instruments which require (*a*) that the borrower live on and operate the Government financed farm or (*b*) graduate to other sources of credit, will not apply to assumptions by an ineligible transferee.

13. This agreement shall be subject to the present regulations of the Government and its future regulations which are not inconsistent with the express provisions hereof.

PART C - SIGNATURES					
14A. Signature		14B. Date			
15A. Signature		15B. Date			
16A. Signature		16B. Date			
17A. Signature		17B. Date			
FSA USE ONLY					
18A. Agency Official's Name	18B. Title				
18C. Signature	18D. Date				

NOTE: The following is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Consolidated Farm and Rural Development Act, as amended (7 U.S.C. 1921 et. seq.). The information will be used to determine eligibility and feasibility for loans and loan guarantees, and servicing of loans and loan guarantees. The information collected on this form may be disclosed to other Federal, State, and local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in the applicable Routine Uses identified in the System of Records Notice for USDA/FSA-14, Applicant/Borrower. Providing the requested information is voluntary. However, failure to furnish the requested information may result in a denial for loans and loan guarantees, and servicing of loans and loan guarantees. The provisions of criminal and civil fraud, privacy, and other statutes may be applicable to the information provided.

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 0560-0236. The time required to complete this information collection is estimated to average 20 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. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.