OMB Control No.: 3245-0348 Expiration Date:

7(A) LOAN POST APPROVAL ACTION CHECKLIST (This form to be used only for those actions identified below)

TO:	Fresno Commercial Loan Service Center	FAX: 559.487.5803	E-mail: f	sc.servicing@sba.gov
	Little Rock Commercial Loan Service Center	FAX: 202.292.3878		rsc.servicing@sba.gov
	Office of International Trade	FAX: 202.481.4842	E-mail:	patrick.tunison@sba.gov
RE: S	BA Loan Name: SBA Loan No			
FROM	I: Lender Name:			
	Address:			
	Loan Officer's Name:			
	Phone: E-mail:		Fax:	
	BA loans that have not been closed or initially disb 0 10 and/or any applicable program guide:	ursed. The Lender cert	tifies that this	s request complies with
	juest that SBA approve an increase in the loan amoun	t from \$	to \$	(Additional guaranty
	in the amount of \$ is attached/has beer			(Productional guaranty
Required Required Required Required Reputer Re	uest that SBA approve an increase in guaranty percen \$ is attached/has been forwarded to Denver).	tage from% to Not applicable to Expo	%. (Additi rt Working C	apital Program (EWCP) loans.
	quest that SBA approve a decrease in the loan amoun			
the	ater than 12 months, <u>SBA must approve the decrease</u> guaranty fee owed to be decreased. For loans with a crease or cancellation.)			
Req that gua	uest that SBA approve a decrease in the guaranty per n 12 months, <u>SBA must approve the decrease prior</u> to aranty fee owed to be decreased. For loans with a ma	the lender closing and in	nitially disbur	sing the loan in order for the
	cellation.)			
Info Info	Inform SBA that the entire loan has been cancelled. Inform SBA that the loan maturity has been changed frommonths tomonths. New maturity is// If the extension goes from a 12 month maturity to a maturity longer than 12 months, the additional guaranty fee of \$ is attached/has been forwarded to Denver.			
	BA loans that have been closed and initially disbur		les that this re	equest complies with
	i0 10, SOP 50 50 and/or any applicable program g quest that SBA approve an increase in the loan amou			(Additional guaranty for in
	the amount of \$ is attached/has been forwarded to Denver.) For SBA <i>Express</i> , Community Express and Patriot Express, <i>for any increase more than 33 percent, the lender certifies that the request is for the original purpose of the loan</i> ,			
	e lender has analyzed the repayment ability of the be			
		orrower using current fil	nanciai injori	nation and repayment ability
U Info	x ists (initials) orm SBA that \$ of the approved loan has	s been cancelled (No ad	liuctmont in a	uproperty for permitted)
	from SBA that the loan maturity has been changed from	menths to m	onthe Now r	and the permitted.)
	ension goes from a 12 month maturity to a maturity lo			
	ittached. (Once SBA changes its records to reflect any			
	aranty fee is earned and cannot be refunded.)	y upproved extension of i	<u>indtuitty beyo</u>	na 12 months, the additional
<u>500</u>	Extend final disbursement date to//	annlicable to EWCP loc	าทร	
-	Information needed by SBA to update its records:			
 The legal name of the business has been changed to:				
1 The	borrower's business address has been changed to:			_
	oonower o ouomeso udureso nuo ocen enungeu nom			
	y change in loan amount or guaranty percentage, attach		ge that explain	s the reason for the change. For
	ions other than those listed above that require SBA consen			
messag	e conforming to the guidelines set forth in the Loan Servic	ing Request Guidelines from	m the Commer	cial Loan Servicing Centers. For all
	ervicing actions permitted by SBA to be taken by a lender		ity, no notice is	required to be given to the SBA. A
list of t	hese servicing actions is found in SOP 50 50 4B, Chapter 4	4.		

(Notices, SOPs, and regulations are located at www.sba.gov/aboutsba/sbaprograms/elending.)

By: (Name, Title)

Date

The estimated burden for completing this form is 5 minutes. You are not required to respond to any collection of information unless it displays a currently valid OMB Control Number. The number for this collection is 3245-0348. Comments on the burden estimate should be sent to U. S.

Small Business Administration, Chief, AIB, 409 3rd Street, SW, Washington, DC 20416. PLEASE DO NOT SEND FORMS TO THIS ADDRESS.

SBA Form 2237 (Revised 6/10)