This form is available electronically.

FSA-85-1	U.S. Department of Agriculture					
(03-26-03)	Farm Service Agency					

1. OMB No. 0560-New

2. Title of Clearance 7 CFR 766, Direct Loan Servicing - Special Page 1

Reporting and Recordkeeping Requirements

Reporting and R	ecorui	reehiii	g Requirements	>						
3.	4. Report R	5.		7. Regulation Part/Sec.	Annual Burden on the Public (Col. 8 x 9=10 and Col. 10 x 11=12)					
Description (Title of Form, Report or Record)		Record			8.	9.	10.	11.	12. Total Burden Hours	
					No. of Respondents	No. of Reports Filed Per Person	Total Annual Responses	Average Time to Respond	Exempt	Non-Exempt
Addendum to Promissory Note or Assumption Agreement for DSA			FSA-2501 (Farmer)	766.57	3*	1	3	15		1
Delinquent Borrower Response to Notice of Loan Servicing			FSA-2511 (Farmer)	766.102, 766.110	2*	1	2	30		1
Current/Distressed Borrower Response to Notice of Servicing			FSA-2513 (Farmer)	766.102, 766.110	1*	1	1	30		1
Nonmonetary Borrower Response to Notice of Loan Servicing			FSA-2515 (Farmer)	766.102, 766.302	1*	1	1	30		1
Delinquent Borrower Acceptance of Offer for Loan Servicing			FSA-2518 (Farmer)	766.106, 766.111	3	1	3	30		2
Current/Distressed Borrower Acceptance of Servicing Offer			FSA-2520 (Farmer)	766.106	1	1	1	30		1
Delinquent Borrower Response to Denial of Loan Servicing			FSA-2522 (Farmer)	766.113	3	1	3	60		3
Current/Distressed Borrower Response to Denial of Servicing			FSA-2524 (Farmer)	766.106	1	1	1	60		1
Borrower Response to Notice of Intent to Accelerate			FSA-2526 (Farmer)	766.355	3	1	3	10		1
Written request for disaster set-aside			Non-form (Farmer)	766.54	3	1	3	15		1
Additional Info. Needed to Determine Eligibility for DSA			Non-form (Farmer)	766.54	2	1	2	15		1
Subtotal				5*		18			14	

This form is available electronically. 1. OMB No. 0560-New 2. Title of Clearance 7 CFR 766, Direct Loan FSA-85-1 **U.S. Department of Agriculture** Servicing - Special (03-26-03) Farm Service Agency Page 2 **Reporting and Recordkeeping Requirements** Annual Burden on the Public 3. 6. 7. (Col. 8 x 9=10 and Col. 10 x 11=12) Report Form No. Record Description Regulation Part/Sec. 12. Total Burden Hours 9. 10. 8. 11. (Title of Form, Report or Record) No. of Reports Total Annual Average Time Exempt Non-Exempt No. of Respondents Filed Per Person Responses to Respond Travel Time 12 FORMTEXT * Denotes unduplicated respondents

5*

18

12

26

Subtotal

TOTALS [