Form RD 3555-13

## ANNUAL INTEREST ASSISTANCE AGREEMENT

FORM APPROVED

(Rev. 12-14)		Guaranteed RH Loans			(	OMB NO. 0575-0179	
Date of Note	Amount of Note		Type of Agreement	1 New 2 Corrected 3 N		Mid-Term Revision 4 Cancellation	
Note Rate %	Floor Rate	%	RHS Borrower ID		Effective Date		
Loan Number	Lender Identification Number			Branch Number	Branch Number		
I. This agreement between the U (called "the Government") and t Equity Agreement with Promis	he borrower whose name ap sory Note dated	pears below (ca	lled "Borrower") suppler	ments the Master 1 (called N	-	ired	
II. TO BE COMPLETED BY B  A. Complete the following	· · · · · · · · · · · · · · · · · · ·	space is needed	d, attach additional sheet	(s)			
all adult members of the household who will receive income.		Planned Income Next 12 Months					
Name		Age	Wages Other	Other Names and addresses of employer or source of income			
1.							
2.							
3.							
B. Number of dependents (n	ot including foster children)	residing in the	dwelling .	_			
SIGNATURES OF BORRO requirements and conditions	• • •		ntion is correct to the b	est of my (our)	knowledge and have rea	d and understand the	
fictitious or fraudulent stater	(Borrower)	ed under this i	(Co-Borr		ars, or both."	(Date)	
III. TO BE COMPLETED BY THE LENDER				Complete this column for each Lo		(Dute)	
				nent (@ Note Rate) nent (@ Note Rate)			
1. Annual Income —		6. Difference					
2. Deductions		7. Interest	7. Interest Assistance Monthly				
3. Adjusted Annual Income (1		Overpa	yment to be Offset	t			
minus 2) Low-Income Limit - Maximum				Total Amount  Monthly Amount			
IV. MONTHLY INSTALLMEN beginning	(not including any amounditions listed on the Master	unts required for	r taxes and insurance esc.  UNITED S	row accounts). Th	dollars per is agreement may be revised for AGRICULTU thorized Signature & Title)		
Date			Date				
V. The Government's share of	of payments made under t	this agreemen	t are reduced by		dollars p	er month for	
months to of	ffset the amount of		which the Gover	nment and Borr	ower agree represents a	n overpayment of	
assistance for the period	to		·				
Information provided on this for installment the borrower will pa							

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 0575-0179. The time required to complete this information collection is estimated to average 40 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  $of\ information$