

USDA
Form RD 5001-8
(XX-XX)

UNITED STATES DEPARTMENT OF
AGRICULTURE RURAL DEVELOPMENT

GUARANTEED LOAN BORROWER DEFAULT STATUS

Complete all items for each delinquent loan. Monthly reports due while loan is delinquent. See FMI for Instructions. Report Month: _____

Agency Program Type: Community Facilities Water and Waste Business and Industry Rural Energy for America Program

1. GLS BORROWER ID		2. BORROWER NAME		3. Agency Assigned Identification #:	
4. LENDER ID NUMBER			5. LENDER BRANCH NUMBER		
6. LENDER NAME			7. LENDER LOAN NUMBER		
8. AGENCY LOAN NUMBER			9. DATE LOAN BECAME DELINQUENT		
10. UNPAID PRINCIPAL ON LOAN \$			11. UNPAID INTEREST ACCRUED\$		
12. TOTAL AMOUNT PAST DUE \$			13. AS OF DATE		
<p>14. DELINQUENT CODE</p> <ul style="list-style-type: none"> 01 - DELINQUENT-DISPOSITION FORTHCOMING 02 - BORROWER WILL PAY DELINQUENT AMOUNT 03 - NOT VALID FOR THIS PROGRAM *04 - FORCED LIQUIDATION PENDING *05 - VOLUNTARY LIQUIDATION PENDING *06 - FORCED LIQUIDATION PENDING, ESTIMATED LOSS CLAIM FILED *07 - VOLUNTARY LIQUIDATION PENDING ESTIMATED LOSS CLAIM FILED *08 - TEMPORARY LOAN BY LENDER TO BRING ACCOUNT CURRENT *09 - BORROWER RESTRUCTURING PENDING 10 - NOT VALID FOR THIS PROGRAM *11 - REAMORTIZATION OR RESCHEDULING OF PAYMENTS COMPLETED *12 - PRINCIPAL/INTEREST PAYMENTS DEFERRED COMPLETED 13 - LOAN REINSTATED AND CURRENT 14 - BANKRUPTCY LIQUIDATION FILED BY BORROWER 15 - BANKRUPTCY REORGANIZATION FILED BY BORROWER 16 - BANKRUPTCY REORGANIZATION COMPLETE, LOAN CURRENT AS PER BANKRUPTCY PLAN 17 - BANKRUPTCY REORGANIZATION COMPLETE, COURT ORDERED INTEREST RATE REDUCTION IN EFFECT AS PER BANKRUPTCY PLAN <p style="text-align: right;">*Requires Rural Development concurrence prior to final lender action.</p>					
15. COMMENTS ON STATUS OF BORROWER LOAN ACCOUNT INCLUDING ACTIONS TAKEN TO BRING ACCOUNT CURRENT:					
16. AUTHORIZED LENDER NAME:		17. SIGNATURE:		18. TITLE	
				19. DATE	

According to the Paperwork Reduction Act of 1995, no persons are 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 XXXX-XXXX The time required to complete this information collection is estimated to average XX 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.