Close Submit Save Form RD3560-1 Position 5 FORM APPROVED (02-05)OMB NO. 0575-0189 UNITED STATES DEPARTMENT OF Exp. Date: MM/DD/YY **AGRICULTURERURAL** DEVELOPMENT STATE TYPE OF LOAN APPLICATION FOR PARTIAL RELEASE, COUNTY SUBORDINATION, OR CONSENT (SPECIFY) CASE NO./PROJECT NO. PROJECT NAME wl Service (hereafter referred to as "Agency") on their in or consent to the following transaction. pr 1. nent.

Close

SUBORDINATION CONSENT	PART I
SUBORDINATION CONSENT	(Completed by Borrower)
The undersigned	QI CD
	(Name of Borrower)
hose address (Including ZIP Code) is	
	ecurity instruments held by the Rural Housing nation of the liens of said security instruments
1 7, 11 7	
List prior liepholders in order of m	(Description) riority and attach the proposed security instru
	morely and attach the proposed security institut
Lien Priority #1:	
Name:	
Address:	
Amount of Lien: \$	
Lien Priority #2:	
·	
Name:Address:	
Amount of Lien: \$	
Lien Priority #3:	
Name:	
Address:	
Amount of Lien: \$	
Lien Priority #4:	
•	
Name:Address:	
Amount of Lien: \$	
Lien Priority #5:	
Name:	
Address:	
Amount of Lien: \$	

Save

Submit

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A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 0575-0189. Public reporting for this collection of information is estimated to be approximately 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, completing, and reviewing the collection of information. All responses to this collection of information are voluntary. However, in order to obtain or retain a benefit, the information in this form is required under 7 CFR Part 3560, "Rural Rental Housing Program." Rural Development has no plans to publish information collected under the provisions of this program. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Rural Development Innovation Center, Regulations Management Division at ICRMTRequests@usda.gov

2. Name of proposed lessee or purchaser:Address:	
Attach a copy of the proposed lease/conveyance.	
3. Description of property to be covered by the release, subord	lination, or consent:
4. The use to be made of the property covered by this applicati	ion is:
5. The anticipated proceeds from this transaction are:	Initial payment \$
3. The anticipated proceeds from this transaction are.	Subsequent payment(s) \$
to disposition of the proceeds as required by Agency pursua	agrees to comply with such terms as may be prescribed by Agency and ant to its regulations, including the method of applying payments to the aless a separate written instrument of subordination or partial release is
executed and delivered by Agency pursuant to this applicate evidence its consent, as lienholder, to the proposed trans-	tion, approval by Agency of this application will merely constitute and action without in any way subordinating its lien, releasing any of its
security, modifying the payment terms of the loan, or otherv	vise affecting any rights of Agency.
_	(Borrower Name)
Date: By:	Submit

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)	
Title:			

Submit

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PART 11

(Completed by Agency)

	event or make more difficult the success: duce the efficiency of the property. the of this property as security for the load Present Mark	n as follows:
3. The following \(\square\) damages \(\square\) benefits wi	ill result to this property from the transac	ction:
I hereby recommend that this application be appr	roved and that the proceeds he applied o	ar released as follows:
INITIAL PAYMENT TO:	SUBSEQUEN'	Γ PAYMENTS TO:
\$extra payment on Agency loadsregular payment on Agency loadsende	S or S or	 % extra payment on Agency loan % regular payment on Agency loan % borrower regular income % prior lienholder debts % pre-closing costs % post-closing costs % repairs or enlargement of complex % purchase additional property % increase reserves % pay investor capital losses % pay additional income tax % other (specify): % other (specify):
Date:		(Signature of Servicing Official)
Date:		(Signature of Approval Official)
	Title:_	United States Department of Agriculture Rural Housing Service