

Status of action against contractor:

I HEREBY CERTIFY that all of the administrative determinations and certifications required by Rural Development regulations prerequisite to providing assistance of the type indicated above have been made and that evidence thereof is in the docket, and that all requirements or pertinent regulations have been compiled with. I hereby approve the above-described assistance in the amount set forth below, and by this document, subject to the availability of funds, the Government agrees to advance such amount to the applicant for the purposes of and subject to the conditions prescribed by Farmers Home /administration regulations applicable to this type of assistance.

CLAIM APPROVED FOR:

- | | | |
|---|--------------------------|---|
| <input type="checkbox"/> 1. Repair defects. | \$ _____ | <input type="checkbox"/> 6. Cancel loan and take dwelling or unit into inventory. |
| <input type="checkbox"/> 2. Reimburse for emergency repairs | \$ _____ | |
| <input type="checkbox"/> 3. Pay temporary living expenses | \$ _____ | |
| <input type="checkbox"/> 4. Pay moving, storage, or relocation expenses | \$ _____ | |
| <input type="checkbox"/> 5. Pay damages resulting from the defect | \$ _____ | |
| | AMOUNT OF CLAIM \$ _____ | |

APPROVAL OFFICIAL		COUNTY OFFICE MAILING ADDRESS	DATE FUNDING AUTHORIZED BY THE NATIONAL OFFICE
TITLE	DATE APPROVED		

TO THE APPLICANT: As of this date, _____, this is notice that your application for the above financial assistance from the Rural Development has been approved, as indicated above, subject to conditions required by the Rural Development. If you have any questions, please contact the County Supervisor.