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| **FSA-2684**  (07-07-14) | **U.S. DEPARTMENT OF AGRICULTURE**  Farm Service Agency  **LAND CONTRACT RECAPTURE AGREEMENT** | Position 2 |

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| This agreement made this *(1)* | |  | day of *(2)* |  | , *(3)* |  | | , is entered into between |
| *(4)* |  | | | | | | (hereinafter called “Seller”) and | |

the United States of America acting through the Farm Service Agency of the U.S. Department of Agriculture (hereinafter called “Agency”). Agency has paid a loss claim on the Land Contract of the Seller under the Standard Guarantee Plan, copy of which is attached as Attachment A and incorporated hereto. The Seller has chosen the appraisal method of payment rather than liquidation, and is retaining the property after

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| liquidation. This agreement will expire on *(5)* |  | , five years from the date of the loss claim payment. |

This agreement is secured by the following security instrument, given in exchange for payment of the loss claim:

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| --- | --- | --- | --- | --- |
| 6.  Date of Security Instrument | 7.  Records of County | 8.  State | 9.  Filing Information  (Book, Page, Reel, etc.) | 10.  Grantor |
|  |  |  |  |  |
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| Based on the appraisal the value of the property is *(11)* $ | |  | | , and the amount of the loss claim paid to the |
| seller was *(12)* $ |  | | . | |

In consideration of Agency making the loss claim payment, Seller agrees to give the Agency alien on the security property in the amount of the loss claim payment and to pay to the Agency any increase in market value (appreciation) above the appraisal value listed above, if the real estate is conveyed before the expiration of the 5 year period.

The total amount of recapture due Agency from the seller will never exceed the amount of the loss claim that was paid.

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| 13. Seller’s Signature | | |
| 14. Authorized Agency Official Name | | 15. Authorized Agency Official Title |
| 16. Signature of Authorized Agency Official | | |
| **NOTE:** | The following statement is made in accordance with the Privacy Act of 1974 (5 U.S.C. 552a - as amended). The authority for requesting the information identified on this form is the Consolidated Farm and Rural Development Act, as amended (7 U.S.C. 1921 et. seq.). The information will be used to determine eligibility and feasibility for loans and loan guarantees, and servicing of loans and loan guarantees. The information collected on this form may be disclosed to other Federal, State, and local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in the applicable Routine Uses identified in the System of Records Notice for USDA/FSA-14, Applicant/Borrower. Providing the requested information is voluntary. However, failure to furnish the requested information may result in a denial for loans and loan guarantees, and servicing of loans and loan guarantees. The provisions of criminal and civil fraud, privacy, and other statutes may be applicable to the information provided.  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 0560-0155. The time required to complete this information collection is estimated to average 15 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. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.** | |

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