FSA-2061

APPLICATION FOR PARTIAL RELEASE OR CONSENT

INSTRUCTIONS FOR PREPARATION

Purpose:

This form is used by borrowers to request agency approval for transactions affecting real estate that serves as security for agency loans, such as partial releases, sale or exchange of security, right of way, lease, and conveyance. Part A is completed by the borrower with agency assistance if needed. The borrower signs in Part A. Part B is completed by the Agency. The authorized Agency officials sign in Part B.

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Handbook Reference: 4-FLP, 5-FLP, and 6-FLP Number of Copies: 0riginal		
Signatures Required: Borrower(s)and authorized Agency official.		
Distribution of Copies:		

The Original of the form is retained in the County Office.

Automation-Related Transactions: (Instructions for writers: provide only the information required, i.e. ADPS TC 3K. If no automation actions are required, insert N/A) DLS, FBP

The borrower, with assistance of the agency, completes Part A, Items 1 - 12

Fld Name / Item No.	Instruction
1(a) Borrower Names	Enter the name(s) of the Borrower(s).
1(b) Release	Check this box if the application is for the release of FSA's security interest.
1(c) Consent	Check this box if the application is for consent. And enter the specific action requiring consent that is being requested with this application.
2 Description of Property	Enter the description of the security property affected by the release or consent request.
3(a) Name of Lienholder	Enter the name of any lienholder, including FSA in the order of lien priority.
3(b) Approximate amount of lien	Enter the approximate amount of the lien.
3(c) Lien priority	Enter the lien priority of the lien -1^{st} , 2^{nd} , 3^{rd} , etc.
3(d)	Enter the property that is security for the applicable lien.

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Property		
4 Use	Enter the use to be made of the property covered by the application and to whom the property will be leased or conveyed.	
5 Proceeds	Enter the amount of the proceeds anticipated or the benefit to be gained by this transaction.	
6 Additional considerations	Enter any additional considerations.	
7 Proposed use of proceeds	Enter the proposed use of the proceeds anticipated.	
8 Items for complete application	Include the items listed, as applicable.	
9(a) – (c) Certifications	Check "YES" or "NO" to each of the three questions.	
10 Certification explanation	If "YES" was marked in any of the three certification questions, enter an explanation.	
11	Read – the paragraph contains a false statement warning.	
12A and B Signature and date	Borrower(s) making the request for partial release or consent sign their name in 12A and enter the date they sign the form in 12B.	

Part B - FSA Approval- To be completed by the agency

1 Comment	Provide documentation to support the recommendation and/or approval of the transaction including compliance with the requirements for approving type of transaction and any of the damages and/or benefits that will result from the transaction. The completion of the electronic signature command in the credit presentation section of the FBP authorizes the local servicing
	official to complete Part B.
2(a) Initial payment	Enter the amount of the initial payment and the distribution of the payment to one of the 5 options listed.
2(b) Subsequent payments	Enter the amount of any subsequent payment(s) and the distribution of the payment(s) to one of the 5 options listed.

Date of Modification xx-xx-20xx

-2001	Date of Modification Ax-Ax-20AX
Fld Name / Item No.	Instruction
3(a) or (b) Recommend- ation	Check either the "recommend" or the "do NOT recommend" box.
3(c) Authorized Agency official name	Enter the name of the authorized Agency official.
3(d) Authorized Agency official title	Enter the title of the authorized Agency official.
3(e) Signature	The authorized Agency official will sign.
3(f) Date	The date will be entered by the authorized Agency official when they sign the form.
4(a) or (b) Agency decision	Check either the "approve" or the "do NOT approve" box.
4(c) Reason for denial	Enter the reason for denial of the request.
4(d) Authorized Agency official name	Enter the name of the authorized Agency official making the decision to either approve or disapprove the release or consent.
4(e) Authorized Agency official title	Enter the title of the authorized Agency official.
4(f) Signature	The authorized Agency official will sign.
4(g) Date	The date will be entered by the authorized Agency official when they sign the form.

Borrowers: Contact the local servicing office if assistance is needed. Agency officials: Contact the State Office if additional guidance is needed.