## Instructions for FSA-2360

## REPORT OF LIEN SEARCH

This form is used to report the lien searches, and to provide the type of lien and the period of the search for any liens, against the property being offered as security.

Submit the original completed form in hard copy or a facsimile copy to the appropriate USDA office. Customers who have established electronic access credentials with USDA may electronically transmit this form to the USDA office, <a href="mailto:provided">provided</a> that the customer submitting the form is the only person required to sign the transaction.

Features for transmitting the form electronically are available to those customers with access credentials only. If you would like to establish online access credentials with USDA, follow the instructions provided at the USDA eForms web site.

## Part A is to be completed by FSA.

Part B, Items 1 through 19 are completed by attorney or representative. Item 20 is completed by FSA.

Part A is for FSA use only.

Part B- Items 1 through 19

Fld Name / Item No.	Instruction
1A Type of Lien	Enter the instrument relating to the lien search specified in Item 5.
1B Date Filed	Enter the filing date of document in Item 1A.
1C File or Book and Page Number	Enter the File or Book and Page Number where the recorded instrument is located.
1D Amount	Enter the dollar amount on the instrument listed in Item 1A, if shown on the instrument.
1E Due Date	Enter the maturity or due date of the instrument in Item 1A, if shown.

Fld Name / Item No.	Instruction
1F To Whom Given	Enter the name and address of the lienholder or assignee of the instrument (mortgagee, beneficiary, etc.).
1G Description of Property	Enter the description of the property offered as security on the instrument listed in Item 1A.
2 Name	Enter the person's name conducting the lien search.
3 Title	Enter the person's title conducting the lien search.
4 Signature	Enter the signature of the person conducting the search.  If you are mailing or faxing this form, print the form and manually enter your signature. If this form is approved for electronic transmission and you have established credentials with USDA to submit forms electronically, use the buttons provided on the form for transmitting the form to the USDA servicing office.
5 Date	Enter the date lien search is completed.
6 Hour	Enter the time the search is completed. (i.e., 3:15) and check the box for AM or PM.
7 Continuation of Lien Search	Items 7A through 7G are used to update a previous search from the date and time annotated in Items 5 and 6 above. (Complete only if this is a subsequent search).
8 Name	Enter the person's name conducting the lien search.
9 Title	Enter the person's title conducting the lien search.
10 Signature	Enter the signature of the person conducting the search.  If you are mailing or faxing this form, print the form and manually enter your signature. If this form is approved for electronic transmission and you have established credentials with USDA to submit forms electronically, use the buttons provided on the form for transmitting the form to the USDA servicing office.
11 Date	Enter the date lien search is completed.

Fld Name / Item No.	Instruction
12 Hour	Enter the time the search is completed. (i.e., 3:15) and check the box for AM or PM.
13 Continuation of Lien Search	Items 13A through 13G are used to complete a subsequent update of a previous search from the date and time annotated in Items 11 and 12 above.
14 Name	Enter the person's name conducting the lien search.
15 Title	Enter the person's title conducting the lien search.
16 Signature	Enter the signature of the person conducting the search.  If you are mailing or faxing this form, print the form and manually enter your signature. If this form is approved for electronic transmission and you have established credentials with USDA to submit forms electronically, use the buttons provided on the form for transmitting the form to the USDA servicing office.
17 Date	Enter the date lien search is completed.
18 Hour	Enter the time the search is completed. (i.e., 3:15 ) and check the box for AM or PM.
19 Remarks	Enter any remarks or comments.

Part B - Item 20 is for FSA use only.