FSA-2205

(10-24-16)

U.S. DEPARTMENT OF AGRICULTURE

Farm Service Agency

GUARANTEED	MICRO	APPLICATION

INSTRUCTIONS TO LENDER: LENDER WILL COMPLETE PARTS A THROUGH F.

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a – as amended). The authority for requesting the information identified on this form is 7 CFR Part 761, 7 CFR Part 762, the Consolidated Farm and Rural Development Act (7 U.S.C. 1921 et seq.), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to determine Lender Institution eligibility to participate in the FSA Guaranteed Micro Lender Program. The information collected on this form may be disclosed to other Federal, State, 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 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 will result in a determination of Lender Institution ineligibility to participate in and receive benefits under the FSA Guaranteed Micro Lender Program.

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 1 hour 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.**

PART A – BACKGROUND INFORMATION PROVIDED BY LENDER	R		
1. LENDER INSTITUTION NAME and MAILING ADDRESS	2. LENDER 9 DIGIT TAX IDENTIFICATION NUMBER		
	3. TELEPHONE NO. (Including Area Code)		
4. REGULATORY OR CERTIFYING AGENCY	5. LENDER TYPE		
6. PRIMARY CONTACT NAME	7. PRIMARY CONTACT TITLE		
0. PRIMART CONTACT NAME	7. PRIMARY CONTACT TITLE		
8. PRIMARY CONTACT TELEPHONE NO.	9. PRIMARY CONTACT EMAIL ADDRESS		
10. DESCRIBE LENDER ORGANIZATIONAL STRUCTURE (Type of entity, key	/ positions, number of years underwriting loans, geographical territory covered, etc.)		
11. DESCRIBE THE SOURCES OF FUNDING THAT WILL BE USED FOR FS	A EZ GUARANTEED LOANS.		
(Indicate if any of these funds are from the issuance of tax exempt bonds)			
12. WHAT TYPE OF LOANS DO YOU EXPECT TO SUBMIT FOR FSA GUAI	RANTEE?		
Annual Operating Line of Credits Intermediate Term			
	nating based on race, color, national origin, religion, sex, gender identity (including gender		
	me derived from a public assistance program, political beliefs, or reprisal or retaliation for bases apply to all programs). Remedies and complaint filing deadlines vary by program or		

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

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PART B – LENDER FINANCIAL INFORMATION			As of :		
13. Total Assets			\$		
14. Loans Receivable	\$				
15. Loan Loss Reserves	\$				
16. Total Liabilities	\$				
17. Net Assets	\$				
PART C – BUSINESS LOAN AC	TIVITY AND PORTFOLIO INFOR	RMATION As	s of :		
	A. Number of Business Loans Closed (History)	B. Number Business Loan Closed \$50,000 or less (History)	-	C. Dollar Amount Closed Past 7 Years – Business Loans \$50,000 or less	
18. Operating Lines of Credit				\$	
19. Intermediate Term Loans				\$	
20. Real Estate Loans				\$	
21. TOTAL				\$	
PART D – BUSINESS LOAN PE	RFORMANCE	As	As of :		
	A. Percentage of Business Loans Currently Delinquent	B. Percentage of Outstanding P Currently Delinquent on Bus Loans	rincipal siness	C. Dollar amount settled or Written Off on Business Loans of \$50,000 or less made in past 7 years	
22. Operating Lines of Credit	%		%	\$	
23. Intermediate Term Loans	%		%	\$	
24. Real Estate Loans	%		%	\$	
25. TOTAL	%		%	\$	
PART E - STAFF					
PART F – LENDER CERTIFICAT I certify that the statements made by m faith to obtain micro lender status. (W	ne in this application are true, compl				
statements on loans. If any information credit and civil and criminal prosecut	on on this application is found to be j ion.)	alse or incomplete, such findin	g may be g	grounds for denial of the requested	
27A. NAME OF LENDER'S REPRESENTATIVE		Z/B. IIILE OF LENDEF	27B. TITLE OF LENDER'S REPRESENTATIVE		
28A. AUTHORIZED LENDER REPRESENTATIVE'S SIGNATURE		28B. DATE (MM-DD-YY	28B. DATE (MM-DD-YYYY)		
PART G – FSA USE ONLY 29A. DATE RECEIVED	29B. DATE COMPLETE	29B. DATE COMPLETE			
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