APPLICATION FOR GUARANTEE

INSTRUCTIONS FOR PREPARATION

Purpose:

Lenders use this form to apply for an FSA loan guarantee.

Loan applicants should not submit this form to FSA. This form is submitted to FSA by lenders after the lender has recorded the required information.

Handbook Reference:	**Number of Copies:**
2-FLP	Original copy. **Lenders submit the original of the completed form in hard copy, scanned via email or facsimile to the appropriate USDA servicing office.**

Signatures Required:
Applicant, Co-Applicant, Co-Signer, Entity Member, and Lender.

Distribution of Copies:
Original to FSA servicing office. (Documents sent via email or facsimile are considered originals)

Automation-Related Transactions: GLS

Lenders who have established electronic access credentials with USDA eforms may electronically transmit this form to the USDA servicing office. The application will be processed; however, the original, signed copy (hard, scanned/emailed or facsimile) of the form must be submitted to the local servicing office before FSA can issue a loan guarantee. 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. If lenders haven't established electronic access credentials with USDA, they can also submit the application via email or facsimile.

All loan applicants must complete Part A and Parts D through F. Entity applicants must complete Part B. Individual applicants must complete Part C. Co-applicants, co-signers, and entity members must complete Parts O and P. Ethnicity, race, gender, and veteran status information is voluntary. Additional pages for Parts O and P may be attached for additional co-applicants, entity members or co-signers.

Lenders must complete Parts G through M.

NOTE: Any questions answered "NO" may require additional information. Lenders should contact the local FSA Office for more direction.

Fld. Name/ Item No.	Instruction

PART A – Type of Operation (Loan Applicant)

1 Type of Operation	Check the appropriate box for the type of operation. Entity applicants complete Part B. Individual applicants complete Part C.

PART B – Entity Applicant Information (Loan Applicant)

1 Entity Name	Enter the entity's name.
2 Entity Address	Enter the entity's business mailing address. Include the physical address if different from mailing address.
3 Number of Entity Members	Enter the number of individuals and/or embedded entities who have an ownership interest in the entity. All members must complete Parts O and P. (Refer to 2-FLP, paragraph 111 (d) for embedded entity information)
4 Entity Tax ID Number	Enter the entity's tax ID number.
5 Entity Headquarters County	Enter the county where the entity's headquarters is located.
6 Entity Telephone Number	Enter the telephone number (Including Area Code) for the entity.
7 Entity Telephone Type	Check the telephone type (Home, Cell, Work) for the entity.

PART C – Individual Applicant Information (Loan Applicant)

1 Applicant's Full Legal Name	Enter the applicant's complete legal name.
2 Applicant's Address	Enter applicant's complete mailing address, including physical address if different from mailing address.
3 Applicant's Birthdate	Enter applicant's date of birth (MM-DD-YYYY).
4 Applicant's 9 Digit Social Security or Tax ID Number	Enter applicant's 9-digit social security number or tax ID number.
5 Residence or Headquarters	Enter county the applicant resides and the county where the headquarters office is located if different from each other.
6 Applicant's Telephone Number	Enter applicant's home or business telephone number, including area code.

Fld. Name/ Item No.	Instruction
7 Applicant Telephone Type	Check the telephone type (Home, Cell, Work) for the applicant.
8 Marital Status	For individual applicants, check the box that most closely corresponds to current marital status.
9 Citizenship Status	Check appropriate box. If not a U.S. citizen, applicant will be asked to provide I-551 and/ or other proper documentation of immigration status as found under PRWORA (8 U.S.C. 1641)

PART D – Other Information (Loan Applicant)

Note: To be considered a Socially Disadvantaged Applicant, the majority interest must be held by eligible individual(s)

1 Other Business Names	If the individual applicant or entity applicant has conducted business under any other name, answer "YES". If not, answer "NO". If "YES", enter the other name(s) the applicant has used.
2A Ethnicity	Check the appropriate box indicating individual applicant or entity applicant ethnicity.
2B Race	Check the appropriate box or boxes indicating individual applicant or entity applicant race.
2C Gender	Check the appropriate box indicating individual applicant or entity applicant gender.
2D Veteran Status	Check the appropriate box indicating individual applicant or entity applicant veteran status.

PART E – Eligibility Information (Loan Applicant)

1 Description of Operation	Describe the applicant's operation or proposed operation including the commodity(s) that is or will be produced.
2 Operator of a Family Farm	Check "YES" if the applicant is or will be the operator of a family size farm. If not, check "NO".
3 Number of Years	Enter number of years individual applicant or entity applicant has operated a farm. If applicant is an entity, number of years farming for each entity member must be input.
4 Acres Owned	Enter total number of acres individual applicant or entity applicant currently owns.
5 Acres Rented	Enter total number of acres individual applicant or entity applicant currently rents.
6 Debt Forgiveness	Check "YES" if you *(including all members if an entity)* have NOT caused the Agency any loss. If you have, check "NO".
7 Delinquent Debt to the U.S. Government	Check "YES" if you *(including all members if an entity)* do NOT have any delinquent debt owed to the US Government. If you have delinquent debt owed to the US Government, check "NO". Debt to the U.S. Government includes but is not limited to education loans, obligations to the Commodity Credit Corporation, Natural Resources Conservation Service, Veterans Administration, FSA, Rural Housing Service or Federal Crop Insurance Corporation/Risk Management Agency.

Fld. Name/ Item No.	Instruction
8 Outstanding Recorded Judgments	Check "YES" if you *(including all members if an entity)* do NOT have any outstanding judgements obtained by the U.S. in Federal Court. If you do have recorded judgements, check "NO".
9 Citizen of the US	Check "YES" if you or the members holding majority interest in the entity are citizens of the U.S., a U.S. non-citizen national, or a qualified alien under applicable Federal immigration laws. If not, check "NO".
10 Legal Capacity	Check "YES" if you *(including all members if an entity)* have the legal capacity to incur debt. If not, check "NO".
11 Controlled Substances	Check "YES" if you *(including all members if an entity)* have NOT been convicted of planting, cultivating, growing, producing, harvesting, storing, trafficking, or possessing a controlled substance within the last 5 crop years. If you have been convicted, check "NO".
12 Disqualification due to Crop Insurance violation	Check "YES" if you (including all members of an entity) are NOT ineligible due to disqualification resulting from a Federal Crop Insurance violation according to 7 CFR Part 718. If you are ineligible for this reason, check "NO".
13 Employee or Related to an Employee	Check "YES" if you *(including all members if an entity)* are NOT an employee, related to an employee, or an associate of an employee of the lender or Farm Service Agency. If you are, check "NO".
14 Sufficient Credit	Check "YES" if you *(including all members if an entity)* are UNABLE to get credit without a guarantee. If you are able to, check "NO".
15 False Statements	Check "YES" if you *(including all members if an entity)* have NOT given FSA false or misleading documents or statements in the past. If you have, check "NO".

PART F - Loan Applicant Certifications (Loan Applicant)

Certification/ Acknowledgment	Please read the statements in this section carefully before signing.
1A Signature of Applicant	Enter the signature of the applicant.
1B Capacity	Check "Self" if you are signing for yourself. Check "Entity Representative" if you are signing on behalf of an entity. Check both boxes if applicable.
1C Date	Enter the date *(MM-DD-YYYY)* the applicant signed the form.

PART G - Type of Assistance Requested (All Lender Types)

Fld. Name/ Item No.	Instruction
1 Request Number	Enter number of requests for each guarantee request submitted on FSA-2211. For example: If form FSA-2211 is submitted for Guaranteed FO assistance only, this item should be completed to show “1 of 1” and Parts G, H, and I would be completed only once. If form FSA-2211 is submitted for Guaranteed FO assistance, Guaranteed OL assistance, and Guaranteed OL-Line of Credit assistance, only Parts G, H, and I must be completed for each guarantee requested. The separate request section should be completed to show “1 of 3", “2 of 3", and “3 of 3”.
2 Loan Type	Check the appropriate box for the type of loan the applicant is requesting.
3 EZ Guarantee	Check “YES” if the guarantee request is submitted under the EZ Guarantee program. Check “NO” if the guarantee request is NOT submitted as an EZ Guarantee.
4 Loan Amount or LOC Ceiling	Enter the amount of the loan request or Line-of-Credit (LOC) ceiling.
5 Interest Rate	Enter the rate of interest the loan applicant will be charged and check the appropriate box if the rate is “Fixed” or “Variable”. **Note:** If the interest rate is variable or fixed for less than five years, check Variable. If the interest rate is fixed for five or more years, check Fixed.
6 Requested Guarantee Percentage	Check “Maximum” box if requesting that FSA consider the maximum guarantee percentage allowable or choose “Other” and enter the requested guarantee percentage if a guarantee percentage less than the maximum is desired.
7 Repayment Period	Enter the repayment period (years) for the loan requested. **Note:** For LOC, enter the number of years the loan will be outstanding, not the number of years of advances.
8 Principal Repayment Terms	Enter the principal repayment terms for the loan requested, including estimated installment; even, uneven, balloon; and frequency of installment.
9 Interest Repayment Terms	Enter the interest repayment terms for the loan requested, including estimated installment; even, uneven, balloon; and frequency of installment.

PART H – Funds Purpose (All Lender Types)

Fld. Name/ Item No.	Instruction
1 Funds Purpose	Enter purpose for which loan funds obtained under FSA guarantee will be used. **Example 1:** OL/LOC Request for Guarantee Annual operating costs for cash grain operations Annual family living costs **Example 2:** OL to refinance 'authorized' farming debts Carry-over operating losses Machinery and Equipment debts

2 Funds Amount	Enter the amount of money to be used for each purpose. **Example 1:** OL/LOC Request for Guarantee Annual operating costs for cash grain operations $30,000 Annual family living costs $18,000 **Example 2:** OL Request for Guarantee Carry-over operating losses $92,000 Machinery and Equipment debts $88,000

PART I - Proposed Security (All Lender Types)

1 - 5 Proposed Security	Enter specific security information for each field. **Example 1:** OL/LOC Request for Guarantee 1. Item Description / 2. Lien Position / 3. Est. Value / 4. Amount of Prior Lien / 5. Collateral Value Crops — 1st — $96,000 — $0 — $96,000 Machinery — 2nd — $82,000 — $50,000 — $32,000 **Example 2:** OL Request for Guarantee 1. Item Description / 2. Lien Position / 3. Est. Value / 4. Amount of Prior Lien / 5. Collateral Value Machinery/Equipment — 1st — $280,000 — $65,000 — $215,000 RE — 2nd — $82,000 — $50,000 — $32,000
6 Totals	Enter totals of column from Items 3, 4 and 5.

PART J – Interest Assistance Documentation (Applicable Only for Interest Assistance Applications)

Fld. Name/ Item No.	Instruction
1 Net Cash Flow without Interest Assistance	Enter information from the applicant's cash flow budget. This item should be completed for all requests for assistance
2 Net Cash Flow with Interest Assistance	Complete Item 2 only if Item 1 is negative and the lender is requesting interest assistance. If applicant has multiple guaranteed loans, lender is to indicate on which loans interest assistance is requested.

PART K – EZ Guarantee Documentation (Applicable Only for EZ Guarantee Applications)

1 Applicant shows the ability to repay…	Check "YES", if your analysis shows the applicant shows the ability to repay this loan. If not, check "NO". Repayment can be demonstrated by such things as: • Scorecard analysis score of _____ • Historical debt coverage ratio of _____ • Pro forma debt coverage ratio of _____ • Or other repayment capacity indicator calculated Also include how this compares to your minimum underwriting standard or acceptable level of risk.
2 Applicant has Acceptable Credit History	Check "YES" if applicant, including all members of the entity, have acceptable credit history. If not, check "NO".

PART L - Environmental Information (All Lender Types)

Lenders shall carefully consider questions 1 through 8 and respond with the appropriate answers for the farm operation proposed for guarantee. If the lender has questions regarding these issues, the FSA Farm Loan Manager at the local USDA Service Center should be contacted for assistance.

Lenders must complete a site visit to the operation and conduct environmental reviews as applicable.

1 HEL/WL Compliance	Check "YES" if compliance on the AD-1026 has been certified and is on file. Otherwise check "NO".
2 Land Use	Check "YES" if proceeds from this request or project will NOT accommodate any shift in land use, ground disturbance, clearing of woody vegetation or stumps, or for drilling of a well. Otherwise check "NO".
3 Floodplains	Check "YES" if the property on which farming activities are taking place is NOT located near or within a floodplain. Otherwise check "NO".
4 Historical and Archaeological Sites	Check "YES" if property on which farming activities take place is NOT known to be of historical significance or contain any known archaeological sites. Otherwise check "NO".
5 Hazardous Substances	Check "YES" if property on which the farming activities take place is NOT known to be contaminated with hazardous substances or waste and does NOT contain underground storage tanks. Otherwise check "NO".

Fld. Name/ Item No.	Instruction
6 Endangered Species	Check “YES” if there are NO known endangered species or habitats that will be disturbed by the operation. Otherwise check “NO”.
7 Environmental Compliance	Check “YES” if there are NO pending or active lawsuits regarding environmental compliance against the operator or property and there are NO environmental liens or judgements filed against the property as a result of not complying with Federal or State environmental laws. Otherwise check “NO”.
8 State Water Quality Standards	Check “YES” if this is NOT a livestock operation. Check “NO” if this is a livestock operation and include number of animals and type of livestock.

PART M - Lender Information and Certification (All Lender Types) - Read the certification statement.

1 Lender Status	Check box that represents current lender status.
2A - G Lender Certifies	Item G - All lenders enter the effective date of FSA-2201, Lender’s Agreement.
3A - B Lending Institution Name, Address & Telephone Number	Enter the Lender’s name, complete mailing address and phone number *(Include Area Code)*.
4A Lender Tax ID Number	Enter the Lender’s 9 Digit Tax ID Number.
4B Regulatory Agency	Enter the lender’s primary oversight agency *(e.g., FDIC, OCC, FCA)*.
5 Email Address	Enter lender representative’s email address.
6A Name of Lender's Representative	Enter the name of official authorized to execute official binding documents on the lender’s behalf.
6B Title of Lender Representative	Enter the title of official authorized to execute official binding documents on the lender’s behalf.
7A Signature of Authorized Lender Representative	Enter the signature of the individual whose name appears in Item 4A. The lender should promptly submit the completed application to FSA for consideration. If you are mailing, emailing 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
7B Date	Enter the date the official authorized to execute official binding documents on the lender's behalf signed this form.

PART N - FSA USE ONLY

1A Date Received	Insert date application is received.

Fld. Name/ Item No.	Instruction
1B Date Completed	Insert date application is determined complete.

PART O – Co-Applicant / Entity Member / Co-Signer Information (If Applicable)

1A Co-Applicant's, Entity Member's, or Co-Signer's Name	Enter the co-applicant's, entity member's, or co-signer's complete legal name.
1B Co-Applicant's, Entity Member's, or Co-Signer's ID Number	Enter co-applicant's, entity member's, or co-signer's social security number or tax ID Number.
1C Co-Applicant's, Entity Member's, or Co-Signer's Birthdate	Enter co-applicant's, entity member's, or co-signer's date of birth *(MM-DD-YYYY)*.
1D Co-Applicant's, Entity Member's, or Co-Signer's Address	Enter the co-applicant's, entity member's, or co-signer's complete mailing address, including physical address if different from mailing address.
1E Residence or Headquarters	Enter county the co-applicant, entity member, or co-signor resides in or the county where the headquarters office is located if an embedded entity.
1F Co-Applicant's, Entity Member's, or Co-Signer's Telephone No.	Enter co-applicant's, entity member's, or co-signer's home or business telephone number, including area code.
1G Co-Applicant's, Entity Member's, or Co-Signer's Telephone Type	Check the co-applicant's, entity member's, or co-signer's telephone type (Home, Cell, Work)
1H % Ownership	Enter the percent of the entity that is owned by the member.
1I Co-Signer Only	Check this box if acting as co-signer only.
1J Marital Status	Check the box that most closely corresponds to current marital status of the co-applicant or the entity member, if an individual.
1K Citizenship Status	Check appropriate box. If not a U.S. citizen, applicant will be asked to provide I-551 and/ or other proper documentation of immigration status as found under PRWORA (8 U.S.C. 1641)

Items 1L – 1O – Voluntary Information for Monitoring Purposes (Complete as applicable)

1L Ethnicity	Check the appropriate box indicating your ethnicity.

Fld. Name/ Item No.	Instruction
1M Race	Check the appropriate box or boxes indicating your race.
1N Gender	Check the appropriate box indicating your gender.
1O Veteran Status	Check the appropriate box indicating your veteran status.
Note: If additional Co-Applicants, Entity Members, or Co-Signers; complete Items 2A – 2O. Additional copies of Pages 5 and 6 may be attached if necessary.	

PART P – Co-Applicant, Entity Member, and/or Co-Signer Certifications

Certification/ Acknowledgment	Please read the statements in this section carefully before signing.
1A Signature of Co-Applicant or Entity Member	Enter the signature of the co-applicant or entity member.
1B Capacity	Check "Self" if you are signing for yourself. Check "Entity Representative" if you are signing on behalf of an entity. Check both boxes if applicable.
1C Date	Enter the date *(MM-DD-YYYY)* the co-applicant or entity member signed the form.
Note: If additional Co-Applicants, Entity Members, or Co-Signers complete Items 2A – 2C in the same manner. Additional copies of Pages 5 and 6 may be attached if necessary.	

PART Q – Supporting Information for SEL/CLP lenders (For SEL/CLP Lenders Completing Non-EZ Guaranteed Loans)

1 Please attach the following	Attach the appropriate items as indicated for SEL or CLP lenders.