



United States
Department of
Agriculture

Rural Development



REQUEST FORMS





Training Objectives

- Forms
 - 1003 Uniform Residential Loan Application
 - 3555-21 Request for Single Family Housing Guarantee



Request Forms

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Loan Terms

Borrower

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Forms

(Select form to view/print)

- 1003 Uniform Residential Loan Application**
- 3555-21 Request for Single Family Housing Loan Guarantee**

(You may check 1 or 2 borrowers at a time to view/print.)

Borrower

- Homeowner, John
- Homeowner, Mary

Display Form

Request Forms are prepared in Adobe® Acrobat® Portable Document Format (PDF) and require the free Adobe Acrobat Reader software to view. The downloadable Acrobat Reader software is available at NO CHARGE from the [Adobe Systems, Inc.](http://www.adobe.com) site.



Forms

(Select form to view/print)

- 1003 Uniform Residential Loan Application**
- 3555-21 Request for Single Family Housing Loan Guarantee**

(You may check 1 or 2 borrowers at a time to view/print.)

Borrower

- Homeowner, John
- Homeowner, Mary

Display Form



Uniform Residential Loan Application

This application is designed to be completed by the applicant(s) with the Lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower," as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when the income or assets of a person other than the Borrower (including the Borrower's spouse) will be used as a basis for loan qualification or the income or assets of the Borrower's spouse or other person who has community property rights pursuant to state law will not be used as a basis for loan qualification, but his or her liabilities must be considered because the spouse or other person has community property rights pursuant to applicable law and Borrower resides in a community property state, the security property is located in a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of the loan.

If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below):

Borrower		Co-Borrower			
I. TYPE OF MORTGAGE AND TERMS OF LOAN					
Mortgage Applied for:	<input type="checkbox"/> VA <input type="checkbox"/> FHA	<input type="checkbox"/> Conventional USDA/Rural Housing Service	<input type="checkbox"/> Other (explain):		
Agency Case Number	Lender Case Number 111222333				
Amount \$ 144,444.44	Interest Rate 4.5000 %	No. of Months 360	Amortization Type: <input checked="" type="checkbox"/> Fixed Rate <input type="checkbox"/> GPM		
<input type="checkbox"/> Other (explain):		<input type="checkbox"/> ARM (type):			
II. PROPERTY INFORMATION AND PURPOSE OF LOAN					
Subject Property Address (street, city, state, & ZIP) 607 N Otis St. Marion, IL 62959			No. of Units 1		
Legal Description of Subject Property (attach description if necessary)			Year Built 0		
Purpose of Loan	<input type="checkbox"/> Purchase <input type="checkbox"/> Refinance	<input type="checkbox"/> Construction <input type="checkbox"/> Construction-Permanent	<input type="checkbox"/> Other (explain):		
Property will be:		<input checked="" type="checkbox"/> Primary Residence <input type="checkbox"/> Secondary Residence <input type="checkbox"/> Investment			
Complete this line if construction or construction-permanent loan.					
Year Lot Acquired	Original Cost	Amount Existing Liens	(a) Present Value of Lot		
	\$	\$	\$		
		(b) Cost of Improvements	Total (a + b)		
		\$	\$		
Complete this line if this is a refinance loan.					
Year Acquired	Original Cost	Amount Existing Liens	Purpose of Refinance		
	\$	\$			
		Describe Improvements	<input type="checkbox"/> made <input type="checkbox"/> to be made		
		Cost \$			
Title will be held in what Name(s)		Manner in which Title will be held	Estate will be held in: <input type="checkbox"/> Fee Simple <input type="checkbox"/> Leasehold (show expiratory date)		
Source of Down Payment, Settlement Charges and/or Subordinate Financing (explain)					
Borrower		III. BORROWER INFORMATION		Co-Borrower	
Borrower's Name (include Jr. or Sr. if applicable) Homeowner, John		Co-Borrower's Name (include Jr. or Sr. if applicable) Homeowner, Mary			
Social Security Number ***-**-5000	Home Phone (incl. area code)	DOB (mm/dd/yyyy) 12-10-1968	Yrs. School	Social Security Number ***-**-2000	DOB (mm/dd/yyyy) 11-10-1974
<input checked="" type="checkbox"/> Married <input type="checkbox"/> Unmarried (include divorced, single, widowed)	Dependents (not listed by Co-Borrower) no. 2	ages:		<input checked="" type="checkbox"/> Married <input type="checkbox"/> Unmarried (include divorced, single, widowed)	Dependents (not listed by Borrower) no. 0
Present Address (street, city, state, ZIP) 111 N Main Street Marion, IL 62959		<input type="checkbox"/> Own <input checked="" type="checkbox"/> Rent 2.25 No. Yrs.		Present Address (street, city, state, ZIP) 111 N Main Street Marion, IL 62959	
Mailing Address, if different from Present Address				Mailing Address, if different from Present Address	
If residing at present address for less than two years, complete the following:					
Former Address (street, city, state, ZIP)		<input type="checkbox"/> Own <input checked="" type="checkbox"/> Rent No. Yrs.		Former Address (street, city, state, ZIP)	
Borrower		IV. EMPLOYMENT INFORMATION		Co-Borrower	
Name & Address of Employer Advocate Hospital		<input type="checkbox"/> Self Employed Yrs. on this job 3.33 Yrs. employed in this line of work/profession 8	Name & Address of Employer Bradstone Law		<input type="checkbox"/> Self Employed Yrs. on this job 1.25 Yrs. employed in this line of work/profession 5
Position/Title/Type of Business		Business Phone (incl. area code)	Position/Title/Type of Business		Business Phone (incl. area code)
If employed in current position for less than two years or if currently employed in more than one position, complete the following:					





Form RD 3555-21 (Rev. 06-15)

UNITED STATES DEPARTMENT OF AGRICULTURE
RURAL DEVELOPMENT
RURAL HOUSING SERVICE

Form Approved OMB No. 0575-0179

REQUEST FOR SINGLE FAMILY HOUSING LOAN GUARANTEE

Approved Lender: CARDINAL LENDING	Approved Lender Tax ID No.: 558811770
Contact: Dean-two	Approved Lender E-Mail: kimberly@atl.lending.com
Phone Number: (314) 335-9522	Fax Number: (314) 555-6677
Third Party Originator (TPO):	TPO Tax ID No.:

Please issue a Conditional Commitment for Single Family Housing Loan Guarantee in the following case:

Applicant Information (Please complete, circle, or mark as appropriate) Name: Homeowner, John SSN: ***-**-5000 Date of Birth: 12-10-1968 U.S. Citizen: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Permanent Resident/Qualified Alien: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Veteran: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Disabled: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Gender: <input checked="" type="checkbox"/> M <input type="checkbox"/> F First Time Homebuyer: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Ethnicity: (Check only One Box) <input type="checkbox"/> Hispanic or Latino <input checked="" type="checkbox"/> Not Hispanic or Latino (Check as many boxes as applicable) Race: <input checked="" type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander Marital Status: <input checked="" type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried The applicant <input type="checkbox"/> has <input checked="" type="checkbox"/> does not have a relationship with any current Rural Development employee. Explain: Applicant's Credit Score: 0 <input checked="" type="checkbox"/> No Score CAIVRS #: GSA/SAM Exclusion: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (check Yes if any party is excluded, otherwise check No) Date GSA/SAM Checked: 03-01-2017	Co-Applicant Information (Please complete, circle, or mark as appropriate) Name: Homeowner, Mary SSN: ***-**-2000 Date of Birth: 11-10-1974 U.S. Citizen: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Permanent Resident/Qualified Alien: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Veteran: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Disabled: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Gender: <input type="checkbox"/> M <input checked="" type="checkbox"/> F First Time Homebuyer: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Ethnicity: (Check only One Box) <input checked="" type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino (Check as many boxes as applicable) Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input checked="" type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander Marital Status: <input checked="" type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried The applicant <input checked="" type="checkbox"/> has <input type="checkbox"/> does not have a relationship with any current Rural Development employee. Explain: Co-Applicant's Credit Score: 771 <input type="checkbox"/> No Score CAIVRS #: GSA/SAM Exclusion: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (check Yes if any party is excluded, otherwise check No) Date GSA/SAM Checked: 03-01-2017
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ANY ADDITIONAL APPLICANTS MUST BE FULLY DOCUMENTED ON A SEPARATE FORM.

Property Address: 607 N Otis St
 City, State, Zip Code: Marion, Illinois 62959 County: Williamson
 Is this a Refinance Loan? No Yes If Yes, refinanced loan is an RD Single Family Housing Guaranteed Loan Direct Loan
 1a. Number of persons in the household: 4 1b. Number of dependents under age 18 or full-time students: 2
 2a. Current annual income for the household is \$66,660.00 2b. Current adjusted income for the household is: \$59,700.00
 [See page 3 for documentation of annual income]
 3. PITI ratio: 19.6056 TOTAL DEBT ratio: 20.0685
 4. We propose to loan \$144,444.44 for 30 years at 4.5000 % per annual with payments (P&I) of \$731.98 per month.
 5. The interest rate is based on the Fannie Mae on 02-09-2017 (required to be completed).
 The interest rate is locked in until _____
 The interest rate will float until loan closing (documentation of lock date will be required w/ loan closing report).
NOTE: If the interest rate increases at loan closing, the loan must be re-underwritten and this document must be recertified.
 6. The applicant understands that Rural Development approval of guarantee is required and is subject to the availability of funds.
 7. The applicant is unable to secure the necessary conventional credit without a Rural Development guarantee upon reasonable rates, terms, and conditions in which the applicant could reasonably be expected to fulfill. (See 7 CFR 3555 HB-1-3555 Chapter 5 and 8 for conventional credit definition).
 8. Loan funds will be used for the following purpose(s):

Purchase / Refinance Amt:		
Financed Loan Closing Costs:		
Repairs/Other:		
Guarantee Fee:		\$1,444.44
Total Request:		\$1,444.44





Common Issues: Data missing/does not match

- Loan amount
- Interest rate
- Income (annual, adjusted, and repayment)
- Number of household members
- No signatures
- Blank data fields applicable to request



Form RD 3555-21 (Rev. 06-15)

Applicant: Homeowner, John Co Applicant: Homeowner, Mary

WORKSHEET FOR DOCUMENTING ELIGIBLE HOUSEHOLD AND REPAYMENT INCOME

Lender Instructions: Determine eligible household income for the Single Family Housing Guaranteed Loan Program (SFHGLP) by documenting all source/types of income for all household members. Qualify the loan by documenting all source/type of income that is stable and dependable utilized to repay the loan.

Identify all Household Members	Age	Full-time Student Y/N?	Disabled Y/N?	Receive Income Y/N?	Source of Income

ANNUAL INCOME CALCULATION (Consider anticipated income for the next 12 months for all adult household members as described in HB-1-3555, Paragraph 9.3. Website for instructions/administrative notices: <http://www.rurdev.usda.gov/RegulationsAndGuidance.html>)

1. Applicant (Wages, salary, self-employed, commission, overtime, bonus, tips, alimony, child support, pension/retirement, social security disability, trust income, etc.). Calculate and record how the calculation of each income source/type was determined in the space below.	
2. Co-Applicant (Wages, salary, self-employed, commission, overtime, bonus, tips, alimony, child support, pension/retirement, social security, disability, trust income, etc.). Calculate and record how the calculation of each income source/type was determined in the space below.	
3. Additional Income to Primary Income (Automobile Allowance, Mortgage Differential, Military, Secondary Employment, Seasonal Employment, Unemployment.) Calculate and record how the calculation of each income source/type was determined in the space below.	
4. Additional Adult Household Member (s) who are not a Party to the Note (Primary Employment from Wages, Salary, Self-Employed, Additional Income to Primary Employment, Other Income). Calculate and record how the calculation of each income source/type was determined in the space below.	
5. Income from Assets (Income from household assets as described in HB-1-3555, Chapter 9). Calculate and record how the calculation of each income source/type was determined in the space below.	
6. Annual Household Income (Total 1 through 5)	

Form RD 3555-21 (Rev. 06-15)

Applicant: Homeowner, John Co Applicant: Homeowner, Mary

ADJUSTED INCOME CALCULATION (Consider qualifying deductions as described in HB-1-3555, Paragraph 9.5)

7. Dependent Deduction (\$480 for each child under age 18, or full-time student attending school or disabled family member over the age of 18) - # _____ x \$480	\$ 0
8. Annual Child Care Expenses (Reasonable expenses for children 12 and under) Calculate and record the calculation of the deduction in the space below.	\$ _____
9. Elderly/Disabled Household (1 household deduction of \$400 if 62 years of age or older, or disabled and a party to the note)	\$ _____
10. Disability (Unreimbursed expenses in excess of 3% of annual income. See HB-1-3555, Paragraph 9.5 D for eligibility.) Calculate and record the calculation of the deduction in the space below.	\$ _____
11. Medical Expenses (Elderly/Disabled households only. Unreimbursed medical expenses in excess of 3% of annual income. See HB-1-3555, Paragraph 9.5E for further information.) Calculate and record the calculation of the deduction in the space below.	\$ _____
12. Total Household Deductions (Enter total 7 through 11)	\$ 0
13. Adjusted Annual Income (Item 6 minus item 12) Income cannot exceed Moderate Income Limit to be eligible for SFHGLP	\$ 0
Moderate Income Limit: _____ State: _____ County: _____	



Common Issues: Data missing/does not match

- Household information
- Different calculations from GUS
- Missing calculations
- Missing signature
- Blank data fields applicable to request



Form RD 3555-21
(Rev. 06-15)

Applicant: Homeowner, John

Co Applicant: Homeowner, Mary

NOTICE TO APPLICANT REGARDING PRIVACY ACT INFORMATION

The information requested on this form is authorized to be collected by the Rural Housing Service (RHS), Rural Business Cooperative Services (RBS), Rural Utilities Service (RUS) ("the agency") by title V of the Housing Act of 1949, as amended (42 U.S.C. 1471 et seq.) or by the Consolidated Farm and Rural Development Act (7 U.S.C. 1921 et seq.), or by other laws administered by RHS, RBS or RUS.

Disclosure of information requested is voluntary. However, failure to disclose certain items of information requested, including your Social Security Number or Federal Identification Number, may result in a delay in the processing of an application or its rejection. Information provided may be used outside of the agency for the following purposes:

1. When a record on its face, or in conjunction with other records, indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, and whether arising by general statute or particular program statute, or by regulation, rule, or order issued pursuant thereto, disclosure may be made to the appropriate agency, whether federal, foreign, state, local, or tribal, or other public authority responsible for enforcing, investigating or prosecuting such violation or charged with enforcing or implementing the statute, or rule, regulation, or order issued pursuant thereto, if the information disclosed is relevant to any enforcement, regulatory, investigative, or prosecute responsibility of the receiving entity.
2. A record from this system of records may be disclosed to a Member of Congress or to a Congressional staff member in response to an inquiry of the Congressional office made at the written request of the constituent about whom the record is maintained.
3. Rural Development will provide information from this system to the U.S. Department of Treasury and to other Federal agencies maintaining debt servicing centers, in connection with overdue debts, in order to participate in the Treasury Offset Program as required by the Debt Collection Improvement Act, Pub. L. 104-134, Section 31001.
4. Disclosure of the name, home address, and information concerning default on loan repayment when the default involves a security interest in tribal allotted or trust land. Pursuant to Cranston-Gonzales National Affordable Housing Act of 1990 (42 U.S.C. 12701 et seq.), liquidation may be pursued only after offering to transfer the account to an eligible tribal member, the tribe, or the Indian Housing Authority serving the tribe(s).
5. Referral of names, home addresses, social security numbers, and financial information to a collection or servicing contractor, financial institution, or a local, state, or federal agency, when Rural Development determines such referral is appropriate for servicing or collecting the borrower's account or has provided for in contracts with servicing or collection agencies.
6. It shall be a routine use of the records in this system of records to disclose them in a proceeding before a court or adjudicative body, when: (a) the agency or any component thereof; or (b) any employee of the agency in his or her official capacity; or (c) any employee of the agency in his or her individual capacity where the agency has agreed to represent the employee; or (d) the United States is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation, provided, however, that in each case, the agency determines that disclosure of the records is a use of the information contained in the records that is compatible with the purpose for which the agency collected the records.
7. Referral of name, home address, and financial information for selected borrowers to financial consultants, advisors, lending institutions, packagers, agents, and private or commercial credit sources, when the agency determines such referral is appropriate to encourage the borrower to refinance their RHS indebtedness as required by title V of the Housing Act of 1949, as amended (42 U.S.C. 1471) or to assist the borrower on the sale of the property.
8. Referral of legally enforceable debts to the Department of the Treasury, Internal Revenue Service (IRS), to be offset against any tax refund that may become due the debtor for the tax year in which the referral is made, in accordance with the IRS regulations and under the authority contained in 31 U.S.C. 3720A.
9. Referral of information regarding indebtedness to the Defense Manpower Data Center, Department of Defense, and the United States Postal Service for the purpose of conducting computer matching programs to identify and locate individuals receiving Federal salary or benefit payments and who are delinquent in their repayment of debts owed to the U.S. Government under certain programs administered by the agency in order to collect debt under the provisions of the Debt Collection Act of 1992 (5 U.S.C. 5514) by voluntary repayment, administrative or salary offset procedures, or by collection agencies.
10. Referral of names, home addresses, and financial information to lending institutions when Rural Development determines the individual may be financially capable of qualifying for credit with or without a guarantee.
11. Disclosure of names, home addresses, social security numbers, and financial information to lending institutions that have a lien against the same property as the agency for the purpose of the collection of the debt by Rural Development or the other lender. These loans can be under the direct and guaranteed loan programs.
12. Referral to private attorneys under contract with either the agency or with the Department of Justice for the purpose of foreclosure and possession actions and collection of past due accounts in connection with the agency.
13. It shall be a routine use of the records in this system of records to disclose them to the Department of Justice when: (a) the agency or any component thereof; or (b) any employee of the agency in his or her official capacity where the Department of Justice has agreed to represent the employee; or (c) the United States Government, is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation and the use of such records by the Department of Justice is therefore deemed by the agency to be for a purpose that is compatible with the purpose for which the agency collected the records.
14. Referral of names, home addresses, social security numbers, and financial information to the Department of Housing and Urban Development (HUD) as a record of location utilized by Federal agencies for an automatic credit prescreening system.
15. Referral of names, home addresses, social security numbers, and financial information to the Department of Labor, state wage information collection agencies, and other federal, state, and local agencies, as well as those responsible for verifying information furnished to qualify for federal benefits, to conduct wage and benefit matching through manual or automated means, for the purpose of determining compliance with federal regulations and appropriate servicing actions against those not entitled to program benefits, including possible recovery of improper benefits.
16. Referral of names, home addresses, and financial information to financial consultants, advisors, or underwriters, when Rural Development determines such referral is appropriate for developing packaging and marketing strategies involving the sale of Rural Development loan assets.
17. Rural Development, in accordance with 31 U.S.C. 3711 (e)(5), will provide to consumer reporting agencies or commercial reporting agencies information from this system indicating that an individual is responsible for a claim that is current.
18. Referral of names, home and work addresses, home telephone numbers, social security numbers, and financial information to escrow agents (which also could include attorneys and title companies) selected by applicant or borrower for the purpose of closing the loan.

Form RD 3555-21
(Rev.06-15)

Applicant: Homeowner, John

Co Applicant: Homeowner, Mary

NOTIFICATION TO APPLICANT ON USE OF FINANCIAL INFORMATION FROM FINANCIAL INSTITUTION

Pursuant to Title XI, section 1113(h) of Public Law 95-636, your application for a government loan or loan guaranty authorizes the Agency, in connection with the assistance you seek, to obtain financial information about you contained in financial institutions. No further notice of subsequent access to this information shall be provided during the term of the loan or loan guaranty.

As a general rule, financial records obtained pursuant to this authority may be used only for the purpose for which they were originally obtained. However, they may be transferred to another Agency or department if the transfer is to facilitate a lawful proceeding, investigation, examination, or inspection directed at the financial institution in possession of the records (or another legal entity not a customer). The records may also be transferred and used (1) by counsel representing a government authority in a civil action arising from a government loan, loan guaranty, or loan insurance agreement; and (2) by the Government to process, service or foreclose a loan or to collect on an indebtedness to the Government resulting from a customer's default.

The Agency reserves the right to give notice of a potential civil, criminal, or regulatory violation indicated by the financial records to any other agency or department of the Government with jurisdiction over that violation. Such agency or department may then seek access to the records in any lawful manner.



GovDelivery Sign up

https://public.govdelivery.com/accounts/USDARD/subscriber/new?qsp=USDARD_25



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Thank you for supporting
the USDA Single Family
Housing Guaranteed Loan
Program!





In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

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 [How to File a Program Discrimination Complaint](#) 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.

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