

Form RD 1927-19
(Rev. 11-99)

UNITED STATES DEPARTMENT OF AGRICULTURE
RURAL HOUSING SERVICE/FARM SERVICE AGENCY

FORM APPROVED
OMB NO. 0575-0147

CERTIFICATION OF ATTORNEY

SUBJECT:

Date:

TO:

You have been selected by _____ to prepared a title opinion/title insurance, and handle the loan closing in connection with Rural Housing Service (RHS) or Farm Service Agency (FSA) loan application filed by this party. If you desire to do this work, please complete the bottom portion of this form and return it to this office immediately. You are cautioned not to begin work on this case until you are notified by the approval official that based on the information presented you have been approved by RHS/FSA.

RHS/FSA Official

I hereby certify that I am a practicing attorney, a member in good standing of the bar of _____

I will provide title clearance through the use of:

- _____ a title opinion.
- _____ a title insurance policy (when issuing a title insurance policy, that includes a closing protection letter, liability insurance and a fidelity bond are not required).

I am currently covered with Lawyer's Professional Liability Insurance in the amount \$ _____ per occurrence issued by _____ of _____. The deductible is \$ _____. The policy number is _____. Coverage expires on _____.

I and all of my employees and associates having access to the funds involved in an RHS/FSA loan are currently covered by a fidelity bond in the amount of at least \$ _____ for each individual.

Attorney

Date

RHS/FSA Approval Official

() Approved () Not Approved

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According to the Paperwork Reduction Act of 1995, no persons are 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 0575-0147. The time required to complete this information collection is estimated to average 10 minutes 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.

Used by the attorney to certify to liability and fidelity coverage before approval by approving official.

PROCEDURE FOR PREPARATION

: RD Instruction 1927-B and HB-1-3550.

PREPARED BY

: Agency approving official and attorney.

NUMBER OF COPIES

: Original and one.

SIGNATURES REQUIRED

: Agency approving official and attorney.

DISTRIBUTION OF COPIES

: Original retained in Local Office as file copy to attorney.

INSTRUCTIONS FOR PREPARATION

1. Indicate the date the form is executed.
2. Indicate the name and address of the attorney selected by the applicant to close the loan.
3. Insert the name, address, and phone number of the applicant.
4. To be signed by the loan approving official.
5. Insert the name of the state in which the attorney is a member of the bar.
6. Indicate the dollar amount of liability insurance.
7. Insert the name and address of the attorney's liability insurance company.
8. Indicate the dollar amount of the policy deductible.
9. Indicate the policy number.
10. Indicate the date the policy expires.
11. Insert the required level of insurance. The amount will, at a minimum, cover the amount of the loan to be closed.
12. To be signed by the attorney selected by the applicant.