(12-05)

UNITED STATES DEPARTMENT OF AGRICULTURE **RURAL DEVELOPMENT** SINGLE FAMILY HOUSING GUARANTEED LOAN PROGRAM (SFHGLP)

REQUEST FOR RESERVATION OF FUNDS

LENDER INFORMATION:	
Submitting Lender Name:	Tax I.D. No
Address:	
Lender Contact Person:	
Contact Phone No. Ext.	Fax No.
	
Rural Development Approved Lender (Complete when Submitting Lender (listed above) is not an Rural Development Approved Lender):	
Name:	Tax I.D. No
APPLICANT/PROPERTY INFORMATION:	
Reservation Amount Requested: \$	Applicant and Co-Applicant are both First Time Home buyers
Is this a Refinance Loan? Yes If Yes, Loan being refinanced is a Rural Development Single Family Housing OR Guaranteed Loan Direct Loan	
Number People in Household: Number	of Dependents Under Age 18 or Full-time Student:
Applicant Information (Please complete, circle, or mark as appropriate)	Co-Applicant Information (Please complete, circle, or mark as appropriate)
Name:	Name:
SSN: Date of Birth:	SSN: Date of Birth:
US Citizen: ☐ Yes ☐ No Permanent Resident/Qualified Alien: ☐ Yes ☐ No	US Citizen: Yes No Permanent Resident/Qualified Alien: Yes No
Veteran: Yes No Disabled: Yes No Gender: M F	Veteran: Yes No Disabled: Yes No Gender: M F
Ethnicity: (Check only One Box) Hispanic or Latino	Ethnicity: (Check only One Box) Hispanic or Latino
☐ Not Hispanic or Latino	Not Hispanic or Latino
(Check as many boxes as applicable)	(Check as many boxes as applicable)
Race: American Indian or Alaska Native Asian	Race: American Indian or Alaska Native Asian
Black or African American	Black or African American
☐ Native Hawaiian or Other Pacific Islander ☐ White	☐ Native Hawaiian or Other Pacific Islander ☐ White
Marital Status: ☐ Married ☐ Separated ☐ Unmarried	Marital Status: ☐ Married ☐ Separated ☐ Unmarried
Property Address:	
City, State, Zip Code:	County:
We are processing an application from the above named person(s), and expect to have a complete package, to you within 60 days.	
Please reserve funds for this loan. We have reviewed the applicant's income and credit history and have tentatively determined the	
applicant(s) has sufficient qualifying income and credit history to proceed with this application.	
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	Date:

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 0575-0078. The time required to complete this information collection is estimated to average 30 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.

(Authorized Lender Representative/Official)