

Form RD 449-2  
(Rev. 7-97)

*Position 5*  
UNITED STATES DEPARTMENT OF AGRICULTURE  
RURAL DEVELOPMENT

FORM APPROVED  
OMB NO. 0570-0014

**STATEMENT OF COLLATERAL**

**OFFERED BY APPLICANT AS SECURITY FOR LOAN AND APPRAISER'S VALUATION REPORT**

|                            |                 |
|----------------------------|-----------------|
| NAME (Applicant)           | EMPLOYER ID NO. |
| ADDRESS (Include Zip Code) | RD CASE NUMBER  |

**SUMMARY COLLATERAL OFFERED**

| CLASSIFICATION  | Cost    | Net Book Value | For Use of                |
|---|---------|----------------|---------------------------|
|   |         |                | Appraiser<br>Market Value |
| 1. Land and land improvements                                     |         |                |                           |
| 2. Buildings  |         |                |                           |
| 3. Machinery and Equipment  |         |                |                           |
| 4. Automotive Equipment   |         |                |                           |
| 5. Office Furniture and Equipment                                 |         |                |                           |
| 6. Other  |         |                |                           |
| 7. Total Presently Owned Collateral                               |         |                |                           |
| 8. Real and personal property liens<br>(Not to be paid from loan) | X X X X |                |                           |
| 9. Equity in Collateral   | X X X X |                |                           |
| 10. Collateral to be acquired (Total Cost)                        |         | X X X X        |                           |
| 11. Total   |         |                |                           |

**SUMMARY OF COLLATERAL TO BE ACQUIRED**

| CLASSIFICATION                                   | Exact Cost |         | For Use of                |
|--|------------|---------|---------------------------|
|  |            |         | Appraiser<br>Market Value |
| 1. Land Acquisition                              |            | X X X X |                           |
| 2. New Buildings or Plant Construction           |            | X X X X |                           |
| 3. Acquisition of Machinery and Equipment        |            | X X X X |                           |
| 4. Acquisition of Automotive Equipment           |            | X X X X |                           |
| 5. Acquisition of Office Furniture and Equipment |            | X X X X |                           |
| 6. Other   |            | X X X X |                           |
| 7. Total (To Item 10 above)                      |            | X X X X |                           |

THE APPRAISER CERTIFIES that he has personally and thoroughly inspected the collateral as listed in this Report and has estimated the value of the collateral to be acquired. Furthermore, as of \_\_\_\_\_ the market values shown in the above Summary are fair and reasonable as of that date. Additional comments are attached to this Report.

Appraiser's Signature \_\_\_\_\_ Date of Report \_\_\_\_\_  
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Used by loan applicants to list collateral owned and to be purchased with loan funds, which will be used as security for a loan requested from a lender. Reviewed by the lender and subsequently Rural Development, if a guarantee is requested, for completeness and adequacy.

(see reverse)

**PROCEDURE FOR PREPARATION** : RD Instruction 1980-E.

**PREPARED BY** : Appraiser.

**NUMBER OF COPIES** : Original and three.

**SIGNATURES REQUIRED** : Appraiser.

**DISTRIBUTION OF COPIES** : Original to lender, one copy to borrower, copy to State Office, and copy to Department of Labor. (For cases involving assistance under the provisions: original to lender, one copy to borrower, and copy to National Office.)

**PAGE 2 OF FORM RD 449-2**

| REAL ESTATE OWNED   |  |
|---|--|
| NAME (Applicant)  | EMPLOYER ID NO.  |
| ADDRESS (Include Zip Code)  | RD Case No.  |
| Parcel number _____   | Title data: <input type="checkbox"/> Title Insurance <input type="checkbox"/> Abstract |
| Address of Realty Offered _____   | <input type="checkbox"/> Other (indicate)  |
| _____   | Realty in name of _____  |
| _____   | Recorded: Book _____ Page _____  |
| _____   | County _____   |
| <p>1. Land and land improvements (Do not include buildings-see Sec. 2 below) (Land improvements such as paving, utilities, fences, etc.)</p> <p>Cost _____ Date acquired _____</p> <p>Legal description (Attach if too long)*</p>   |  |
| <p>* If available, attach plat survey. <span style="float: right;">Total Acres: _____</span></p>  |  |
| <p>2. Buildings (Show square footage of each) Cost (If separate from land) \$ _____ Date acquired _____</p>   |  |
| <p>Building description: List each building separately with brief description including size, type of construction, number of stories, date erected, use, and condition.</p>  |  |
| <div style="border: 1px solid black; width: fit-content; margin-left: auto; margin-right: auto; padding: 5px;"> <p style="text-align: center; margin: 0;">Assessed Value</p> <p style="margin: 0;">Land _____</p> <p style="margin: 0;">Improvements _____</p> <p style="margin: 0;">Taxes _____</p> </div> |  |
| <p>Rent if Applicable. \$ _____ <input type="checkbox"/> Month <input type="checkbox"/> Annually <input type="checkbox"/> Lease _____ Term of Lease</p>   |  |
| <p>Carry Totals to Page 1<br/>(Summary) Lines 1 and 2</p>   |  |

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| REAL ESTATE TO BE ACQUIRED   |  |
|--|--|
| NAME (Applicant)   | EMPLOYER ID NO.  |
| ADDRESS (Include Zip Code)   | RD Case No.  |
| Parcel number _____  | Title data: <input type="checkbox"/> Title Insurance <input type="checkbox"/> Abstract |
| Address of Realty Offered _____  | <input type="checkbox"/> Other (indicate)  |
| <p>1. Land and land improvements (Do not include buildings - see Sec. 2 below) (Land improvements such as paving, utilities, fences, etc.)</p> <p>Cost _____</p> <p>Legal description (Attach if too long)*</p><br><br><br><br><br><br><br><br><br><br><p>* If available, attach plot survey. <span style="float: right;">Total Acres: _____</span></p>  |  |
| <p>2. Buildings (Show square footage of each) Cost (If separate from land) \$ _____</p><br><p>Building description*: List each building separately with brief description including size, type of construction, number of stories, date erected, use, and condition.</p><br><br><br><br><br><br><br><br><br><br><div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: auto; margin-right: auto;"> <p style="text-align: center; margin: 0;">Assessed Value</p> <p>Land _____</p> <p>Improvements _____</p> <p>Taxes _____</p> </div> |  |
| <p>* Identify if existing building or to be constructed</p> <p>Rent if Applicable. \$ _____ <input type="checkbox"/> Month <input type="checkbox"/> Annually <input type="checkbox"/> Lease _____ Term of Lease</p>  |  |
| <p>Carry Totals to Page 1<br/>(Summary) Lines 1 and 2</p>  |  |
| 3 of 6   |  |

### PAGE 4 OF FORM RD 449-2

**PERSONAL PROPERTY**

(And any fixtures not included with Real Estate or Building on Page 2)

|   |  |
|---|--|
| The following described property is located or headquartered at _____<br>Include zip code _____<br>Location is owned <input type="checkbox"/> Leased <input type="checkbox"/> | Name of Applicant _____<br>RD Case No. _____ |
|---|--|

Applicants will make an **ACTUAL PHYSICAL INVENTORY OF THE PERSONAL PROPERTY** being offered as collateral **DO NOT TAKE FROM BOOK RECORDS**. List each item in accordance with the classification numbers on page 1, e.g.

\***(3) Machinery and Equipment (4) Automotive Equipment (5) Office furniture and equipment (6) Other for example: jigs, dies, fixtures, airplanes, etc.** (List property at different locations on separate pages)

| Classification <input type="checkbox"/><br>Item Name-Manufacturer-Make           | Date Acquired | Model | Serial Number | New Used Rebuilt | COST         | NET BOOK VALUE | For Use of Appraiser |              |
|--|---------------|-------|---------------|------------------|--------------|----------------|----------------------|--------------|
|  |               |       |               |                  |              |                | Cond.                | Market Value |
|  |               |       |               |                  |              |                |                      |              |
|  |               |       |               |                  |              |                |                      |              |
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|  |               |       |               |                  |              |                |                      |              |
|  |               |       |               |                  |              |                |                      |              |
|  |               |       |               |                  |              |                |                      |              |
|  |               |       |               |                  |              |                |                      |              |
|  |               |       |               |                  |              |                |                      |              |
|  |               |       |               |                  |              |                |                      |              |
|  |               |       |               |                  |              |                |                      |              |
|  |               |       |               |                  |              |                |                      |              |
| Carry Totals of Each Classification to Page 1<br>(Summary) Lines 3, 4, 5, and 6. |               |       |               |                  | <b>Total</b> |                |                      |              |
| <b>BE SURE ALL ITEMS CAN BE READILY INSPECTED BY APPRAISER</b>                   |               |       |               |                  |              |                |                      |              |

I, \_\_\_\_\_  
 (Signature of owner, partner, or corporation officer) \_\_\_\_\_ (Title)

of the \_\_\_\_\_  
 (Name of Firm)

I certify that the above machinery and equipment listing represents an *actual physical inventory* taken on (date) \_\_\_\_\_  
 Mark items (in column 2) with an asterisk if they are subject to conditional bills of sale or liens the balance of which will not be paid off from a loan. Show total of such items on line 8, page 1 (Summary).



