Form RD 3560-57

		FORM APPROVED OMB NO. 0575-0189			
	ADVISE NUMBER				
	TAXPAYER IDENTIFICATION NUMBER	DATE	20		
	CASE NUMBER	PROJECT NU	MBER		
	COMPROMISE ADJUSTMENT CH	IARGE OFF	CANCELLATION		
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(02-05)		TAXPAYER IDENTIFIC	CATION NUMBER		DATE 20				
APPLICATIO	CASE NUMBER	CASE NUMBER PROJECT NUMBER							
SETTLEMENT OF IN	COMPROMISE	ADJUSTMENT	CHARGE OFF	CANCELLATION					
PART I GENERAL INFORMATION									
A. I(We)	Addrsos of Dobtor				,				
(Name and Address of Debtor) the owners of									
		(Name and Address of			·				
hereby request that the indebtedness described below be considered for settlement pursuant to the pertinent law and regulations and certify that the following statements are true and correct to the best of my (our) knowledge.									
PART II DEBTS OWED TO THE DEPAR	TMENT OF AGRICULTUR	RE							
LOAN CODE IDENTIFICATION	FINAL DUE DATE	ORIGINAL AMOUNT		UNPAID BALANCE					
(1)	(2)	(3)	INTEREST	(4) PRINCIPAL	TOTAL				
(A) RHS DEBTS FOR WHICH SETTLEMENT IS REQUESTED:									
(B) OTHER DEBTS OWED RHS									
(C) DEBT OWED OTHER AGENCIES OF DEPARTMENT OF AGRICULTURE									
TOTALS									
PART III FINANCIAL INFORMATION									
The following documents are attached:									
A current financial statement and cash flow projects Verification of income									
Verification of assets for the past 12 month	Verification of de	Verification of debts greater than \$1,000							
Tax returns for the past three years		Other:			(Specify)				
PART IV DEBTOR'S OFFER AND CERTIFICATION									
(A) I (We) am (are) unable to pay in full the indebtedness described in Part 11 hereof. I (We) have acted in good faith in an effort to pay said indebtedness; have no reasonable prospects of being able to do so; and hereby offer the sum of dollar (\$) in full and complete settlement of said									
	· •	dollar (\$) in full and comple	ete settlement of said				
indebtedness, to be paid as follows:									
\$		is application. Receipt No Date							
\$, 20							
\$, 20							
\$ on, 20									
will be immediately due and payable and that any installments paid pursuant to this agreement will be applied in partial payment of the total indebtedness. (B) I (We) have not transferred, without adequate consideration, any real or personal property to, nor have I (We) purchased any stocks, bonds, mutual funds, or made any deposits in banks or money market accounts, for others during the past 5 years except: (Explain)									

If the decision contained above in this form results in denial, reduction or cancellation of RHS assistance, you may appeal this decision and have a hearing or you may request a review in lieu of a hearing. Please use the form we have included for this purpose.

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 0575-0189. The time required to complete this information collection is estimated to average 1 hour 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.

PART IV DEBTOR'S OFFER AND CERTIFICATION (continued)							
(C) I (We) have met the requirements of RHS, or its predecessor agencies, in disposing of any mortgaged property except							
(D) I (We) have read all of this application, which is made for the purpose of obtaining hereby certify that all of the statements and representations contained herein are true in a RHS is required to report any written-off indebtedness to the Internal Revenue Service ex	all respects to the best of my (our) knowledge and belief. I (We) understand that						
(E) In making this offer of settlement, I (we) understand and agree that (1) the amount offered will be deposited in the United States Treasury and held in suspense pending consideration of the offer, (2) if the offer is accepted I (we) will be notified, and (3) if the offer is rejected, I (we) will be notified and the amount offered will be returned in the form of a United States Treasury check.							
(F) All of the debts referred to in Part II have been discharged in bankruptcy.	Yes No No						
(G) Witness:	Debtor:						
Witness: Address:	Debtor:						
(H) This application for debt settlement has been adopted by the							
and caused to be executed by the officers b	pelow on this day of , 20						
Attest:	Ву:						
Title: (SEAL)	Title:						
PART V RECOMMENDATION AND APPROVAL							
I find from the statements and disclosures of the debtor(s) that the requirements of the p	pertinent law and regulations have have not been satisfied.						
I recommend the acceptance rejection of the application of the debtor(s) as set out in Part IV hereof.							
REMARKS: (use a separate sheet, if necessary)							
20							
	Servicing Official						
	(Address)						
This settlement is recommended approved rejected under the authority	State Director						
contained in pertinent law and regulations.	Date						
This settlement is approved rejected under the authority contained in pertinent	Administrator						
law and regulations.	Date						