

MFH UNAUTHORIZED ASSISTANCE NOTIFICATION/REPAYMENT AGREEMENT

Debtor Name (Last, First)		Debtor Taxpayer Identification Number (TIN)	
Address		Type of TIN	
		<input type="checkbox"/> Social Security Number	<input type="checkbox"/> Employer Identification Number
City State Zip		Type of Debtor	
		<input type="checkbox"/> Borrower	<input type="checkbox"/> Tenant
Co-Debtor Name (Last, First)		Co-Debtor Taxpayer Identification Number (TIN)	
Address		Type of TIN	
		<input type="checkbox"/> Social Security Number	<input type="checkbox"/> Employer Identification Number
City State Zip		Type of Co-Debtor	
		<input type="checkbox"/> Borrower	<input type="checkbox"/> Tenant
Related Borrower Name		Project Name	
Borrower Account Number		Project Number	Dates of Unauthorized Assistance
			From: To:
Amount of Claim (Rental Assistance)	Amount of Claim (Overage)	Amount of Claim (Other)- Specify	Interest Rate (if applicable)
Identification Method Code	If Identification Method Code is "Other", please explain		
Comments:			

The debtor has received unauthorized assistance pursuant to 7 C.F.R. part 3560, subpart O and wishes to enter into a repayment agreement with the United States of America, acting through the Rural Housing Service, or a successor agency, United States Department of Agriculture (called the "Government"). For value received the Government agrees to enter into a repayment agreement for the unauthorized assistance and Borrower agrees to make payments in accordance with the installment information shown below.

The first installment in the amount of _____, will be due and payable on _____. Thereafter, regular installments each in the amount of _____ will be due and payable on the fifteenth day of each month until the Amount of claim is paid, except that the final installment of the entire debt, if not paid sooner will be due and payable on _____.

Borrower agrees to pay late charges in accordance with regulations of the Government in effect when a late charge is assessed.

Upon default in the payment of any one of the above installments the Government at its option may declare the entire debt immediately due and payable and may take any action authorized therein.

_____ Debtor	_____ Date	_____ Co-Debtor	_____ Date
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_____ Servicing Office Official	_____ Date	_____ Servicing Office Contact	_____ Phone Number
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If Debtor did not sign the form, check the following as applicable

<input type="checkbox"/>	Debtor Refused to sign
<input type="checkbox"/>	Debtor cannot be located