

7(A) LOAN POST APPROVAL ACTION CHECKLIST

то:	For approved loans prior to final disbursement : Loan Guaranty Processing Center (LGPC)	FAX:	202.481.0861	E-mail:	<u>7aloanmod@sba.gov</u>
то:	For Loans in Servicing & Liquidation (after final Fresno Commercial Loan Service Center Little Rock Commercial Loan Service Center	FAX:	559.487.5803		fsc.servicing@sba.gov lrsc.servicing@sba.gov
RE: SE	BA Loan Name:		SB	A Loan No.	
FROM: Lender Name:					
	Lender Contact Name:				
	Phone: E-mail:			Fax:	
 For all loan modifications requested, attach memo to an email for each change that explains the following: Provide full details of current loan terms; Provide specific details of what needs to be changed (e.g., increase or decrease in loan amount or guaranty percentage, change in use of proceeds); and The justification for the change(s) and any supporting documentation (e.g., updated financial information, payments to Denver). For SBA loans that have not been closed or initially disbursed. The Lender certifies that this request complies with SOP 50 10, and/or any applicable program guide: 					
 Request that SBA approve an increase in the loan amount from \$					
SOP 50	A loans that have been closed and initially disburs 50 and/or any applicable program guide: uest that SBA approve an increase in the loan amoun a amount of \$ is attached/has been for rm SBA that the loan maturity has been changed from e extension goes from a 12 month maturity to a matur tached. (Once SBA changes its records to reflect any is earned and will not be refunded.) Only required for Extend final disbursement date to	nt from S rwarded n rity long or Loans	\$ I to Denver months to ger than 12 mon ed extension of	to \$(i months.] ths, the additi maturity bey. n.	. (Additional guaranty fee <i>initials)</i> New maturity is ional guaranty fee of \$

By: (Signature of Authorized Lender Official)

Date

The estimated burden for completing this form is 5 minutes. You are not required to respond to any collection of information unless it displays a currently valid OMB Control Number. The number for this collection is 3245-0348. Comments on the burden estimate should be sent to U.S. Small Business Administration, Director, Records Management Division, 409 3rd Street, SW, Washington, DC 20416, and/or SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Rm. 10202, Washington DC 20503. PLEASE DO NOT SEND FORMS TO THESE ADDRESSES.