



Guarantee Loan Fund *Request for Guarantee Payment*

Lender Number _____ Lender Name _____

Loan Number _____ Borrower(s) Name _____

The Lender referenced above (the "Lender") hereby requests the Wisconsin Housing and Economic Development Authority ("WHEDA") pay to Lender the guarantee payment due on the Guaranteed Loan Fund Loan referenced above (the "Guaranteed Loan") in accordance with the terms of the Master Guarantee Agreement between WHEDA and the Lender.

The undersigned, the Authorized Lender, does hereby represent and certify to WHEDA for its reliance that:

1. The Guarantee Loan is, and has been since it was originated, qualified for the: (check one)

- Agribusiness Guarantee
 Contractor's Guarantee
 Small Business Guarantee
 Neighborhood Business Revitalization Guarantee
 Transform Milwaukee Loan Guarantee

2. Payments on the principal of the Guaranteed Loan are delinquent and in default.

3. Lender has adhered to the policies established in the Master Guarantee Agreement, Loan Authorization and the Lender's Manual. Lender has made all reasonable efforts to collect the Loan, including filing a lawsuit for collection and foreclosure of its security for the Loan, enforcing and collecting on any Loan Guarantee and enforcement of its judgment for any deficiency against any and all assets of the borrower.

4. The Loan was registered with WHEDA in the amount of: \$ _____

Less: The amount the Borrower has paid towards reducing the principal portion of the Loan: \$ _____

Less: Gross proceeds from sale of collateral applied to the outstanding principal balance \$ _____

Less: Applicable fees if financed as part of the Loan: \$ _____

Sub Total: \$ _____

Percentage of Guarantee **X** _____ %

A.) Guarantee Payment \$ _____

Expense Participation

B.) The loan was registered with WHEDA in the amount of: \$ _____

X 10 %

Total \$ _____

C.) Total Expenses, preapproved by WHEDA, relating to workout, litigation, and/or liquidation (attach copies) \$ _____

Multiply by Guarantee Percentage X _____%

Sub Total: \$ _____

Add: Up to 90 days interest \$ _____

Total \$ _____

D.) Lesser of the total of (B) or (C) \$ _____

Total Guarantee Payment

Guarantee Payment from page 1 \$ _____ (A)

Add: Expense Participation \$ _____ (D)

TOTAL¹ \$ _____

¹In no event will the aggregate payment of expenses plus guarantee payment exceed the original guarantee amount.

IN WITNESS WHEREOF, the undersigned has duly executed this Request for Guarantee Payment as of _____, 20 _____

Authorized Lender

Print or Type Name

**Mail to:
Economic Development
WHEDA
PO Box 1728
Madison WI 53701-1728
or
Fax (608) 267-1099**