TO: Rural Development State Directors, Rural Development Managers, and Area Directors

ATTEN: Rural Housing Program Directors

FROM: Tammye Treviño (Signed by Tammye Treviño)
Administrator
Housing and Community Facilities Programs

SUBJECT: Procedure for Ordering Dun and Bradstreet Commercial Credit Reports for Single Family Housing and Multi-Family Housing

PURPOSE/INTENDED OUTCOME:
This Administrative Notice (AN) provides guidance on ordering Commercial Credit Reports for Single Family Housing (SFH) and Multi-Family Housing (MFH) programs, including guidance in ordering individual consumer credit reports on the owner/principal(s). Commercial credit reports are required for SFH general or dealer/contractor approvals and MFH loan making, including Farm Labor Housing (FLH).

COMPARISON WITH PREVIOUS AN:
This AN replaces RD AN No. 4486 (1910-C), dated January 14, 2010, which expired on December 31, 2010.

IMPLEMENTATION RESPONSIBILITIES:
The effective allowable fee to be charged for each commercial credit report is $40 and the fee for a consumer (individual) report is $28 for each individual owner, principal or applicant.

EXPIRATION DATE: February 29, 2012
FILING INSTRUCTIONS: Preceding RD Instruction 1910-C
There are six Regional Coordinators nationwide who have been selected to provide commercial
credit reports within their regions. The National Office continues to award contract funds for the
Dun and Bradstreet (D and B) Reports.

The “host” States and the States within the region are as follows:

**TEXAS**  
Kathy Smith  
Com: 254-742-9748  
Fax: 254-742-9754

**Southwest Region**: NV, UT, AZ, CO, NM, OK, TX, HI,  
PR, and West Pacific Territories

**MICHIGAN**  
Lenore Dryer  
Com: 517-324-5199  
Fax: 517-324-5225

**North-central Region**: ND, SD, NE, MN, IA, WI, MI,  
and IN

**VIRGINIA**  
Nancy Lewis  
Com: 804-287-1564  
Fax: 804-287-1784

**Southeast Region**: AL, FL, GA, NC, SC, VA,  
and WV

**KENTUCKY**  
Elizabeth Moore  
Com: 859-224-7322  
Fax: 859-224-7450

**South-Central Region**: KS, MO, IL, KY, AR, TN, LA,  
and MS

**MONTANA**  
Molly Ghekiere  
Com: 406-585-2558  
Fax: 406-585-2565

**Western Region**: AK, WA, OR, CA, MT, ID, and WY

**DELWARE/MARYLAND**  
Joanne Deiter  
Com: 302-857-3600  
Fax: 302-857-3611

**Northeast Region**: OH, PA, NY, MD, DE, NJ, MA, CT,  
RI, VT, NH, and ME

**For MFH programs**, commercial credit reports are ordered for each newly formed general 
partner or principal organization. Credit reports are also required for established for-profit 
partnerships, corporations and general partners. An individual (consumer) report is required for 
each individual applicant, including co-applicants; on each general partner or principal who is an 
individual of a newly formed for-profit partnership or corporation and for each general partner or 
principal of an established for-profit partnership or corporation as necessary to make a credit
determination. This includes individual applicants under FLH. Typically, commercial credit reports will not be requested for newly formed non-profit organizations and may be ordered for an established non-profit organization at the discretion of the State Director. The fee may be waived for non-profit organizations. See 7 CFR part 3560, §3560.56(d)(5), and the MFH Loan Origination Handbook HB-1-3560, Exhibit 4-7.

For SFH programs, commercial reports will be obtained when required to determine the financial and managerial capacity of a general contractor or dealer/contractor. Typically, when a dealer/contractor or general contractor is a firm, a commercial credit report will be ordered on the firm and an individual (consumer) credit report on each of the principals. If the dealer/contractor or general contractor is a sole proprietorship, a commercial report as well as an individual (consumer) report will be obtained pursuant to RD Instructions 1910-C, §1910.105 and §1910.106 (f).

UniFi is only to be used to obtain individual reports for Single-Family Housing applicants.

D and B will be the only source for obtaining individual credit reports on the principal(s)/owner(s) of manufactured housing dealers, building contractors, applicants for FLH and/or MFH. Attachment 1 to this AN must be completed for each commercial credit report requested and will be faxed to the State Office, Attention: D and B Regional Coordinator. To remit payments for the credit reports, you should use the MFH Payment Transmittal Cover Sheet for Multi-Family Housing and Form RD 3550-17 “Funds Transmittal Report for Single Family Housing”.

If you have any questions regarding the ordering of commercial credit reports, please contact Cynthia L. Johnson at (202) 720-1940.

Attachments
REQUEST FOR COMMERCIAL CREDIT REPORT

To: State Director

Attn: State Coordinator for Commercial Credit Reports

BUSINESS INFORMATION:

Business Name

Business Street Address

City ___________________ State _________ Zip Code _______________________

Business Telephone (Including Area Code)

Business Tax ID# ________________________ DUNS # (if Known) ________________________

PRINCIPAL INFORMATION:

Name ____________________________ Name ____________________________

Street Address ____________________________ Street Address ____________________________

City ___________________ State _________ Zip Code ________________________

City ___________________ State _________ Zip Code ________________________

Home Telephone Number (including Area Code) ____________________________

Home Telephone Number (including Area Code) ____________________________

Social Security Number ____________________________ Social Security Number ____________________________

Percentage of Ownership ____________________________ Percentage of Ownership ____________________________

NOTE: If requesting individual reports on more than two principals, duplicate and complete a second page omitting the business information. Percentage of individual ownership should equal 100 percent.

REPORT TYPE REQUESTED FOR: (mark one)

General Contractor _________

Dealer/Contractor _________

MFH Applicant/Borrower _________

$ ________________________ Date Collected ________________________ Collecting Official ________________________

Fee(s) Collected ________________________

CDM/RDM ________________________ Date Requested ________________________

Office Address ________________________ Telephone (Commercial) (FAX) ________________________

TO BE COMPLETED BY STATE COORDINATOR ONLY: The above information has been reviewed for completeness and forwarded to the HOST State:

__________________________ ________________________ ________________________ ________________________

Signature of State Coordinator

TO BE COMPLETED BY ORDERING OFFICIAL IN HOST STATE:

__________________________ ________________________ ________________________ ________________________

__________________________ ________________________ ________________________ ________________________