OMB Control No.: 2900-0851 Respondent Burden: 30 minutes Expiration Date: 06/30/2026

Departmen	t of Veterans	Affairs	STATUS OF LO	DAN ACCOU			JRE OR
INSTRUCTIONS: Comp		ns. If additional space is			-		The date in Item 1 is
the applicable cutoff per 3	8 CFR 36.						
LOAN NO.:				NOTE: LOAN NUMBER MUST BE NUMERIC, 12 DIGITS VA LOAN NO.:			
CURRENT OWNER:				ORIGINAL VETERAN:			
ORIGINAL LOAN AMOUNT:				PERCENT OF GUARANTY:			
TERM OF LOAN:				P & I:			
DATE OF FINAL DISBURSEMENT:				DATE OF FIRST PAYMENT:			
PROPERTY ADDRESS	3			I			
		ITEM					
1. PRINCIPAL							
AN UNPAID PRINCIPAL						DATE	AMOUNT \$
2. INTEREST							
A. UNPAID INTEREST ("From" is the Interest Collected Date and "To" is the Cutoff Date)						ROM: D:	\$
B. INTEREST BUYDOWN TO OBTAIN A NET VALUE					l	DATE APPLIED	\$
3. AMOUNT IN TAX AND INSURANCE ACCOUNT (If other than a positive balance, show "0" and list advances in Item 6)							\$
4. OTHER CREDITS (e.g., unearned add-on interest or discount, amount in receiver's rent account, unapplied interest, buy down funds escrowed at origination, credits applied by the holder in order to obtain a net value from VA, hazard insurance proceeds, etc.)						DATE	AMOUNT \$
5. ACTUAL FORECLO	SURE COSTS PAID	OR WHICH WILL BE	PAID PRIOR TO DA	TE OF FOREC	LOSUI	RE (Itemize)	
DESCRIPTION PAYMENT DA							AMOUNT PAID
							\$
							\$
6. ANY OTHER CHAR PRESERVATION COS						VANCES AND P	ROPERTY
DESCRIPTION PAY						AYMENT DATE	AMOUNT PAID
							\$
							\$
							\$
7. TOTAL INDEBTED	NESS AT FORECLO	SURE (Or other liquidations	s/cutoff date) (Sum of Items	2A, 5 and 6 less sun	ı of Items	2B, 3 and 4)	\$
8. STATUS OF PROPE							
ΤΥΡΕ ΤΑΧ	DATE LAST PAID	ANNUAL AMOUNT	PERIOD COVERE	D NAME	NAME OF TAX AUTHORITY		TAX AUTHORITY ACCOUNT NO.
COUNTY							
CITY							
SCHOOL							
OTHER TAX							
9. WATER AND SEWE	LER CHARGES AND S		NTS				
AMOUNT		ATE LAST PAID		ТҮРЕ		PERIO	D COVERED
10. NAME, ADDRESS	AND TELEPHONE N	NUMBER OF HOLDER				<u> </u>	
11. SIGNATURE AND TITLE OF LENDING INSTITUTION OFFICIAL (Sign in ink)						12. DATE	
		SUPERSEDES VA FOR	M 26-0971,OCT 2020.				

PRIVACY ACT NOTICE: VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974, or Title 38, CFR 1.576 for routine uses (for example: authorized release of information to Congress when requested for statistical purposes) identified in the VA system of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant Records, Specially Adapted Housing Applicant Records, and Vendee Loan Applicant Records - VA, published in the Federal Register. Your response is required in order to determine your eligibility for a Specially Adapted Housing grant.

RESPONDENT BURDEN: We need this information to determine or verify your eligibility for a grant for specially adapted housing. Title 38, U.S.C. 2101(a) or 2101(b), allows us to ask for this information. We estimate that you will need an average of 30 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.reginfo.gov/public/do/PRAMain. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.