











F801-08

	Section 1: (Required by				CATIO	11				
	<u> </u>			Loan Amount Requested:				BRM:		
	Retailer:			•				p Year:		
		pplicant is a: Joint Operation Individual Partnership Corporation Limited Liability Company Submit legal entity documents with application.								
		here majority of Particip	ating Retailer		Name of Agi	ronoms	v Ren:			
	business is conducted		ating Retailer		Name of Agi	onomy	у кер.			
	Entity Name:			Entity TI	IN:					
	Applicant's (Legal) First Name:						Last Name:	Last Name:		
,	SS#: Street Address:			City:				State:	Zip:	
	County of Residence:			o. of yrs at residence:		Coun	ties farmed in:			
Г	Home Phone: Ce		Cell:	e-ll: e-			il:			
	Date of Birth:		Yr Began Fa	rming:		Marit	al Status: M	arried 🗌 Sing	gle	
ŀ	Spouse (Legal) First N	ame:		MI:		Last 1	Name:			
ľ	SS#:		Date of Birth	1:		Yr Be	egan Farming:			
	Co-Applicant's (Lega	l) First Name:	,	Middle	le Initial: Last Name:					
F	SS#:	Street Address:		II.	City:			State:	Zip:	
F	County of Residence:		No. of yrs at residence:			Coun	Counties farmed in:			
F	Home Phone:		Cell:		e-mail:					
F	Date of Birth:		Yr Began Farming:		Marital Status: Married Single					
F	Spouse (Legal) First Name:		MI:		Last Name:					
-	SS#:		Date of Birth:		Yr Began Farming:					
	SUMMARY OF FINANCIAL POSITION AS OF BALANCE SHEET DATED (INSERT DATE)							NOTE: If		
	Income		Assets				Liabilities			loan reques
	Gross Farm Income:		Current Assets:						\$300,000, applicant is	
	Non-Farm Income:		Intermediate Assets:]	Intermediate Liabilities:			submit
	Source of Non Farm Income:		Long Term Assets:							expanded SIGNED
			Total Assets: Total				Total Liabilities:			balance she
						Net Worth	Net Worth:		days of the application	
									date.	
	Insurance Agency			None	Agent Na	ame:				
	Insurance Agency Address:				Phone:		Insur	ance Premiui	m Current:	Yes No
	Did you have a crop insurance claim within the last 5 years? Yes No If yes, which year(s):									
	Disclosures, Signatures and Authorizations By signing below, I/we certify that this information, together with any additional information provided, is a true, correct and complete statement of our financial condition as of the date indicated and that our financial condition has not materially changed. I/We hereby authorize AgQuest/Verity/Northland Capital to request any Protected Information and/or Personally Identifiable Information including but not limited to my farming operation, insurance policies acquired from Policy Company, USDA, Comprehensive Information Management System, or any agent that is protected from disclosure by the Privacy Act, section 502© of the Federal Crop Insurance Act (Act) or any applicable statue. I/We consent to any credit and employment investigation (both in the current and future years) necessary to act on or verify the supplied information. Upon receipt of the application, applicant(s) shall be notified by a representative of AgQuest/Verity or the Participating Retailer as to any additional information needed to formalize applicant's loan request.									

REFERENCES

Primary Lender:	Contact:	Phone:
Major Supplier of Inputs:	Contact:	Phone:

Section 2:

NOTE: If loan request <\$200,000 enter Income & Expense below. If loan request > \$300,000 submit Cash Flow #F115.

INCOME Date:

INCOME			Date.			iic.
CROP	ACRES	PROJ. YIELD	APP. SHARE	AVG. PRICE	AVG. \$/ACRE	TOTAL
			%	\$	\$	\$
			%	\$	\$	\$
			%	\$	\$	\$
			%	\$	\$	\$
			%	\$	\$	\$
			%	\$	\$	\$
			%	\$	\$	\$
			%	\$	\$	\$
TOTAL ACRES			TOTAL CROP INCOME			\$
Are any crops fed to lives	stock? Yes No		TOTAL OTHER INCOME			\$
If yes, how much?			TOTAL PROJECTED INCOME			\$

EXPENSE

DIRECT	\$ Amount bought	% of Total Needs	Discount
INPUTS	from Retailer		Available
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
TOTAL	\$		%

For Internal Use Only

#	#Companion I II III IV Date:AnalystAIMS	#Increase \$ Date:AnalystOrig #	# Plus Review/Adv Limit Lift Date: Analyst Updated Inputs Uploaded Worksheet Agri-Access Faxed Updated Crop Info.
Borrower Level 1 1 2 13			