



# APPLICATION

## Section 1: (Required by all applicants)

|   |                               |                   |
|---|-------------------------------|-------------------|
| <b>Loan Purpose: Crop Inputs</b>  | <b>Loan Amount Requested:</b> | <b>BRM:</b>       |
| <b>Retailer:</b>  | <b>Loan Type:</b>             | <b>Crop Year:</b> |
| <b>Applicant is a:</b> <input type="checkbox"/> Joint Operation <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <sup>1</sup> <input type="checkbox"/> Corporation <sup>1</sup> <input type="checkbox"/> Limited Liability Company <sup>1</sup><br><sup>1</sup> Submit legal entity documents with application. |                               |                   |
| <b>Location of branch where majority of Participating Retailer business is conducted:</b>   | <b>Name of Agronomy Rep:</b>  |                   |

|  |                                 |   |                           |
|--|---------------------------------|---|---------------------------|
| <b>Entity Name:</b>                    | <b>Entity TIN:</b>              |   |                           |
| <b>Applicant's (Legal) First Name:</b> | <b>Middle Initial:</b>          | <b>Last Name:</b>   |                           |
| <b>SS#:</b>                            | <b>Street Address:</b>          | <b>City:</b>  | <b>State:</b> <b>Zip:</b> |
| <b>County of Residence:</b>            | <b>No. of yrs at residence:</b> | <b>Counties farmed in:</b>  |                           |
| <b>Home Phone:</b>                     | <b>Cell:</b>                    | <b>e-mail:</b>  |                           |
| <b>Date of Birth:</b>                  | <b>Yr Began Farming:</b>        | <b>Marital Status:</b> <input type="checkbox"/> Married <input type="checkbox"/> Single |                           |
| <b>Spouse (Legal) First Name:</b>      | <b>MI:</b>                      | <b>Last Name:</b>   |                           |
| <b>SS#:</b>                            | <b>Date of Birth:</b>           | <b>Yr Began Farming:</b>  |                           |

|   |                                 |   |               |                   |  |
|---|---------------------------------|---|---------------|-------------------|--|
| <b>Co-Applicant's (Legal) First Name:</b> | <b>Middle Initial:</b>          |   |               | <b>Last Name:</b> |  |
| <b>SS#:</b>                               | <b>Street Address:</b>          | <b>City:</b>  | <b>State:</b> | <b>Zip:</b>       |  |
| <b>County of Residence:</b>               | <b>No. of yrs at residence:</b> | <b>Counties farmed in:</b>  |               |                   |  |
| <b>Home Phone:</b>                        | <b>Cell:</b>                    | <b>e-mail:</b>  |               |                   |  |
| <b>Date of Birth:</b>                     | <b>Yr Began Farming:</b>        | <b>Marital Status:</b> <input type="checkbox"/> Married <input type="checkbox"/> Single |               |                   |  |
| <b>Spouse (Legal) First Name:</b>         | <b>MI:</b>                      | <b>Last Name:</b>   |               |                   |  |
| <b>SS#:</b>                               | <b>Date of Birth:</b>           | <b>Yr Began Farming:</b>  |               |                   |  |

### SUMMARY OF FINANCIAL POSITION AS OF BALANCE SHEET DATED (INSERT DATE)

| Income                     | Assets               | Liabilities               |
|----------------------------|----------------------|---------------------------|
| Gross Farm Income:         | Current Assets:      | Current Liabilities:      |
| Non-Farm Income:           | Intermediate Assets: | Intermediate Liabilities: |
| Source of Non Farm Income: | Long Term Assets:    | Long Term Liabilities:    |
|                            | <b>Total Assets:</b> | <b>Total Liabilities:</b> |
|                            | <b>Net Worth:</b>    |                           |

**NOTE:** If loan request > \$200,000, applicant is to submit expanded **SIGNED** balance sheet dated within 60 days of the application date.

### CROP INSURANCE INFORMATION

|  |                               |  |
|--|-------------------------------|--|
| <b>Insurance Agency Name:</b>  | <input type="checkbox"/> None | <b>Agent Name:</b>   |
| <b>Insurance Agency Address:</b>   | <b>Phone:</b>                 | <b>Insurance Premium Current:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>Did you have a crop insurance claim within the last 5 years?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, which year(s):</b> _____ |                               |  |

### 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 statute. 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.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_ Co-Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.

**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 > \$200,000 submit **Cash Flow #F115**.

**INCOME**

Date:

| CROP   | ACRES | PROJ. YIELD | APP. SHARE | AVG. PRICE | AVG. \$/ACRE | TOTAL                         |
|--|-------|-------------|------------|------------|--------------|-------------------------------|
|  |       |             | %          | \$         | \$           | \$                            |
|  |       |             | %          | \$         | \$           | \$                            |
|  |       |             | %          | \$         | \$           | \$                            |
|  |       |             | %          | \$         | \$           | \$                            |
|  |       |             | %          | \$         | \$           | \$                            |
|  |       |             | %          | \$         | \$           | \$                            |
|  |       |             | %          | \$         | \$           | \$                            |
|  |       |             | %          | \$         | \$           | \$                            |
| <b>TOTAL ACRES</b>   |       |             |            |            |              | <b>TOTAL CROP INCOME</b>      |
| Are any crops fed to livestock? <input type="checkbox"/> Yes <input type="checkbox"/> No |       |             |            |            |              | <b>TOTAL OTHER INCOME</b>     |
| If yes, how much?  |       |             |            |            |              | <b>TOTAL PROJECTED INCOME</b> |

**EXPENSE**

| DIRECT INPUTS | \$ Amount bought from Retailer | % of Total Needs | Discount Available |
|---------------|--------------------------------|------------------|--------------------|
|               | \$                             | %                |                    |
|               | \$                             | %                |                    |
|               | \$                             | %                |                    |
|               | \$                             | %                |                    |
|               | \$                             | %                |                    |
|               | \$                             | %                |                    |
|               | \$                             | %                |                    |
| <b>TOTAL</b>  | <b>\$</b>                      |                  | <b>%</b>           |

*For Internal Use Only*

|   |  |  |   |
|---|--|--|---|
| # _____<br>Direct or DirectMAX<br>Date: _____ Analyst _____<br>____ AIMS _____ Web Time<br>____ Agri-Access<br>____ Agri-Access Fax | # _____ Companion I II III IV<br>Date: _____ Analyst _____<br>____ AIMS _____ Lien EM/Web/FX<br>____ FinPack _____ Credit Bureau<br>____ Agri-Access | # _____<br>Increase \$ _____<br>Date: _____<br>Analyst _____<br>Orig # _____ | # _____ Plus Review/Adv Limit Lift<br>Date: _____ Analyst _____<br>____ Updated Inputs _____ Uploaded<br>Worksheet<br>____ Agri-Access Faxed<br>____ Updated Crop Info. |
| Borrower Level <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3                                     |  |  |   |