



# CREDIT APPLICATION

Ref # (Internal): \_\_\_\_\_

Loan Information		
Loan Purpose: <b>Crop input</b>	Maturity Date Requested (Month & Year): <b>March 2020</b>	Amount Requested
Applicant Information		Company Information
Entity Type (Check One): <input type="checkbox"/> Corporation <input type="checkbox"/> Joint Venture <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Co. <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Sole Proprietorship w/ DBA <input type="checkbox"/> Trust		Company Name Company Tax I.D. #                      Company State of Organization Company Street Address Company City                              Company State                      Company Zip Primary Phone Number Assets                                        Liabilities
Primary Applicant or Principal 1 Information		Co-Applicant or Principal 2 Information
Full Legal Name (as shown on State Driver's License)		Full Legal Name (as shown on State Driver's License)
Title (if applicable)		Title (if applicable)
Address		Address
City	State	Zip
County		County
Primary Phone Number	Secondary Phone Number (optional)	Primary Phone Number                      Secondary Phone Number (optional)
Email Address		Email Address
Social Security Number	Date of Birth	Social Security Number                      Date of Birth
Assets	Liabilities	Assets                                        Liabilities
Marital Status - Married, Separated, or Unmarried (required for Sole Proprietorship only)		Marital Status - Married, Separated, or Unmarried (required for Sole Proprietorship only)
Spouse's Full Legal Name (as shown on State Driver's License)		Spouse's Full Legal Name (as shown on State Driver's License)
Spouse's Social Security Number		Spouse's Social Security Number
Spouse's Email Address		Spouse's Email Address

For additional Applicants or Principals complete the Supplemental Information Sheet

Financial Questions			
1) Applicant's Average Cash in Savings + Checking	\$		
2) Have any of the Applicant's declared bankruptcy in the last 14 years?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, which Chapter	<input type="checkbox"/> Chapter 7	<input type="checkbox"/> Chapter 11	<input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13
If Chapter 11, 12, or 13, has the bankruptcy been approved?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has it been discharged?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
3) Are there any judgements against any of the Applicants?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
4) Are there any taxes delinquent?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
5) Are any obligations delinquent?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
6) Does Applicant sell any farm products under a name not listed on this Application?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

If answer yes to any of the Financial Questions, please provide details in the Comments section

Comments:

## Signatures

*Each of the undersigned represents and warrants that: 1) the information in the Credit Application and accompanying Worksheet, if applicable, is complete and correct as of the date shown below, to the best of my knowledge, 2) Lender is authorized to verify the information herein, 3) Lender is authorized to verify my employment history and obtain a credit report for legitimate purposes in connection with this Credit Application, including making a credit decision, monitoring, and collecting the account, 4) I authorize my creditors and insurance agents to release all information regarding my accounts or insurance policies to Lender, 5) Lender is authorized to share any information herein and its credit experience with my creditors and insurance agents, and the Association submitting this Credit Application, 6) I understand and agree that a facsimile of the Credit Application and Worksheet and my signature thereon shall be deemed an original, and 7) I authorize the Association to submit this Credit Application via Lender's web site.*

Applicant's signature	Date	Co-Applicant's signature	Date
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# CROP WORKSHEET

Applicant's Name: \_\_\_\_\_

Ref # (Internal): \_\_\_\_\_

Location of Collateral						
Landowner(s) Name	State	County	Total Acres	Producer's Share %	Type of Rent	Cash Rent Amount

Potential Buyer Information					
Buyer's Name	Address	City	State	Zip	Telephone

Is any of the below listed collateral fed to livestock? Yes or No (circle one). If yes, complete % Fed column.

Collateral Value Calculation												
Commodity	Total Acres	X	Producer's Share (%)	X	Approved Yield	X	Insurance Plan *	% Coverage Level	X	Price **	% Fed ***	Total
Total Production Collateral Value											→	

\* Insurance Plan = RP, YP, ARH, APH, ARP, AYP, Hail Only, CAT, None  
 \*\* Contact participating dealer representative for current commodity prices.  
 \*\*\* Percentage of crop that will be fed to livestock

Crop Insurance Agent Information					
Agency Name	Address	City	State	Zip	Telephone