RIVER ROCK FINANCIAL SERVICES, INC.

AGRICULTURAL CREDIT APPCATION

Business Name_____**Address**_____

City_____**County**_____**State**_____**Zip Code**_____

Social Security #_____**Fed Tax ID#**_____

Business Phone_____**Home Phone**_____**Cell**_____

E-Mail Address_____

Primary AG Products_____**Years in Farming**_____**Full/Part Time**_____

Acres Owned_____**Acres Rented**_____**Other Income**_____

Principals: (Partners, Shareholders or Members)

Name, SSN and % owned	**Home Address & Zip**

Description of Equipment_____

_____

Amount $_____**Terms(mos)**_____

Vendor of Equipment to be leased:

Name	**Address (City & State)**	**Contact**	**Phone**

Total Assets*_____**Total Liabilities***_____**Gross Annual Revenue**_____

***Required on all transactions**

References:

Operating Lender_____**Contact**_____**Phone**_____

City/State_____

Equipment Finance Co._____**Contact**_____**Phone**_____

City/State_____

Mortgage Holder_____**Contact**_____**Phone**_____

City/State_____

The undersigned represents that all information provided with this Application is true and correct. By signing below, the undersigned individual as principal and or guarantor for the applicant, authorizes River Rock Financial, its designees, assignee, or potential assigns, or any lending source to whom this application is submitted ("You") to review or obtain his/her personal and/or business credit information from any source including credit bureau reporting agencies and financial institutions for the purposes of updating, renewing, or extending credit or the collection of any resultant accounts.Additionally, this authorization permits You to share and exchange information and to request, obtain and review bank, financial or other information from past, present, or potential creditors. A fax or photocopy of this authorization shall be valid as the original.

SIGNATURE_____**DATE**_____

SUBMIT TO:

BUBBA LOVETT
706-254-9311
riverrock@swbell.com