



APPLICANT INFORMATION

Primary Applicant

Last Name / Company or Entity:		First Name:		Middle:	
Email:	Phone:	Gender: <input type="checkbox"/> Female	Mobile:	Fax:	
Address:		City:	State:	Zip:	County:
Date of Birth:	Social Security #:	Years at Current Address:		Year Began Farming:	
Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced	<input type="checkbox"/> Male		US Citizen or permanent resident alien?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Co-Applicant

Last Name:		First Name:		Middle:	
Email:	Phone:	Mobile:	Fax:		
Address:		City:	State:	Zip:	County:
Date of Birth:	Social Security #:	Years at Current Address:		Year Began Farming:	
Relationship to Primary Applicant:		Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	US Citizen or permanent resident alien?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Co-Applicant

Last Name:		First Name:		Middle:	
Email:	Phone:	Mobile:	Fax:		
Address:		City:	State:	Zip:	County:
Date of Birth:	Social Security #:	Years at Current Address:		Year Began Farming:	
Relationship to Primary Applicant:		Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	US Citizen or permanent resident alien?		<input type="checkbox"/> Yes <input type="checkbox"/> No

IF ADDITIONAL CO-APPLICANTS, PLEASE COMPLETE A SEPARATE CREDIT APPLICATION

BUSINESS INFORMATION

Liability Insurance:	Insurance Agent:	Phone:
Crop Insurance:	Insurance Agent:	Phone:

LOAN REQUEST DESCRIPTION

Real Estate Loan Amount: \$	Ag Equity Line of Credit: \$					
Term (Years):	Amortization (Years):	Payments Per Year:	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Semi-Annual	<input type="checkbox"/> Annual
Purpose of Loan(s):	<input type="checkbox"/> Real Estate-Purchase	<input type="checkbox"/> Cash Out	<input type="checkbox"/> Real Estate-Refinance			

FINANCIAL INFORMATION

Gross Farm Income:	Net Farm Income:	Net Non-Farm Income:	Source:
Total Assets:	Total Liabilities:	Cash and Cash Equivalents:	
Total Acres Owned:	Total Acres Rented:		

COLLATERAL INFORMATION

Property Address:			County:	
Title to vest in what name(s)?:		Title will be held as (Sole/Joint/Tenants/etc...):		
Principal Residence? <input type="checkbox"/> Yes <input type="checkbox"/> No		Accessible by Public Road? <input type="checkbox"/> Yes <input type="checkbox"/> No		Name of Public Road?
Complete Either (1) - Section/Township/Range OR (2) - Abbreviated Legal Description:				
(1)	Section:	Township:		Range:
(2)	Abbreviated Legal Description:			
Estimated Appraised Value:				
Land:		Residence:		All Other Improvements:
Estimated Annual Real Estate Tax:		Estimated Gross Rent/Income:		
Tillable Acres:	Irrigated Acres:	Pasture Acres:	Permanent Planting Acres:	CRP Acres:
Timberland Acres:	Wooded Acres:	Building Site Acres:	Other (Roads, Waste, etc...)	Total Acres:
Describe any improvements and/or permanent plantings on the collateral:				
If there are any water, irrigation or well rights/restrictions, please provide a brief description:				
Are there any underground storage tanks on the property? <input type="checkbox"/> Yes <input type="checkbox"/> No				

DECLARATION REPRESENTATIONS AND WARRANTS

Are there any outstanding judgements against you? If yes, please explain:			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Explanation:				
Have you, or any entity in which you have greater than a 10% ownership, been declared bankrupt within the past seven years?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please indicate the type of bankruptcy, date of filing and date of discharge, if any:				
Applicant:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13	Date Filed/Discharged:
Co-Applicant:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13	Date Filed/Discharged:
Have you, or any entity in which you have greater than 10% ownership, had property foreclosed upon or given title or deed in lieu thereof in the last seven years?				
Applicant:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Explanation:	
Co-Applicant:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Explanation:	
Do you have MPC I Insurance or Federal Crop Insurance in force?		Applicant:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Co-Applicant: <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a guarantor of any debts that are not reflected on current balance sheet statements? If yes, please explain:				
Applicant:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Explanation:	
Co-Applicant:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Explanation:	
Do you have any accounts that are past due by 30 days or more? If yes, please explain:				
Applicant:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Explanation:	
Co-Applicant:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Explanation:	

AUTHORIZATION TO RELEASE INFORMATION

Federal law requires all financial institutions to obtain, verify, and record information that identifies each loan applicant. The names, addresses, dates of birth, and other identifying information used in this application will be verified. Applicant(s) may also be asked to provide driver's licenses or other identifying documents prior to closing the loan. Applicant(s) authorize Ag Financial Funding and its affiliated lenders ("Lender"), to make all inquiries deemed necessary to verify the accuracy of the information contained herewith to determine applicant(s) creditworthiness. The information contained in this application is provided for the purpose of obtaining business (non-consumer) credit with Lender on behalf of Applicant(s). Applicant(s) represent and declares that the proceeds of the loan will be used solely for business purposes. Applicant(s) intend that all credit data submitted to Lender be considered as part of this application. In addition, Applicant(s) are aware that the documentation supplied will be relied on by Lender in making its credit decision and is subject to re-verification after the date of the loan disbursement and hereby authorize the same. Lender is hereby authorized to answer any questions from third parties concerning the Applicant(s) experience with Lender. Applicant(s) further agree and consent that Lender may obtain an appraisal of, and evidence of title to, and existing liens on, the property offered as security and that Applicant(s) are responsible for the payment of all costs of obtaining this information. Ag Financial Funding will not disclose any non-public personal information about you or your operation except as authorized by you or as required by law.

No commitment is binding unless confirmed in writing. Applicant(s) warrant and represent the information herein submitted is true, correct and complete to the best of their knowledge in all aspects and Lender may consider this representation continuing until written notice to the contrary is received by the Lender from Applicant(s).

EQUAL CREDIT OPPORTUNITY ACT: If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact our Customer Service Department at, P.O. Box 80321 Bakersfield, CA. 93380 or by phone at 661-440-1749 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. NOTICE: 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 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. The Federal Agency that administers compliance with this law concerning this creditor is the Bureau of Consumer Financial Protection, 1700 G Street NW., Washington DC 20006 and Washington DC 20006 and the Federal Trade Commission, Equal Credit Opportunity, Washington DC 20580.

Applicant(s) grant to Lender the option to use its likeness in any format now known or later developed, for any business purpose related to Lender. Applicant(s) understand that its likeness may not necessarily be used by virtue of this agreement. Applicant(s) waive the right to receive any payment, royalties, or other compensation in connection with the use of its likeness for these purposes.

I HAVE READ, UNDERSTOOD AND AGREE TO MAKE THESE REPRESENTATIONS AND WARRANTIES:

Primary Applicant Signature: _____

Co-Applicant Signature: _____

If a Partnership, Corporation or other entity:

Name: _____
Title: _____
By: _____

Date: _____

Date: _____

Date: _____