



**APPLICANT - PLEASE DESCRIBE YOUR NON-FARM INCOME BELOW. (Attach sheets, if needed)**

NOTE: Alimony, child support or separate maintenance need not be revealed if it will not be considered as a basis for repaying this loan.

SOURCE	ANNUAL AMOUNT
	\$
	\$
	\$
	\$
	\$
	\$
<b>TOTAL NON-FARM INCOME</b>	<b>\$</b>

**PLEASE LIST YOUR CREDIT REFERENCES.**

Name	Account Number		
Address	City	State	Zip
Name	Account Number		
Address	City	State	Zip
Name	Account Number		
Address	City	State	Zip
Name	Account Number		
Address	City	State	Zip

**CO-APPLICANT - PLEASE DESCRIBE YOUR NON-FARM INCOME BELOW. (Attach sheets, if needed)**

NOTE: Alimony, child support or separate maintenance need not be revealed if it will not be considered as a basis for repaying this loan.

SOURCE	ANNUAL AMOUNT
	\$
	\$
	\$
	\$
	\$
	\$
<b>TOTAL NON-FARM INCOME</b>	<b>\$</b>

**PLEASE LIST YOUR CREDIT REFERENCES.**

Name	Account Number		
Address	City	State	Zip
Name	Account Number		
Address	City	State	Zip
Name	Account Number		
Address	City	State	Zip
Name	Account Number		
Address	City	State	Zip

**ADDITIONAL APPLICANT**

**PLEASE TELL US ABOUT YOUR OPERATION BACKGROUND:**

Name	Where is your operation headquarters:		
Address	State: _____	County: _____	
City	State	Zip	Marital Status: _____ D-Divorced SP-Separated M-Married W-Widow/Widower S-Single
SSN/Tax ID	Birthday		Are you a(n): _____ 0 - None 1 - Joint Director 2 - FLBA/FLCA Dir. 3 - PCA Dir. 4 - Farm Credit Bank Dir 5 - Farm Credit Admin. Dir 6 - Association Employee or Director 7 - Bank Employee 8 - FCA Employee 9 - Relative of Employee
Phone Bus.	FAX		
Email	What year did you begin farming? _____		
	Primary Farm Product: _____		
	Acres Operated: <input type="text"/>		

**PLEASE TELL US ABOUT YOUR PRESENT EMPLOYMENT.**

Employer	Employer Phone Number:		
Address	Years employed here:		
City	State	Zip	Annual Salary Wages: \$

**PLEASE ANSWER THE FOLLOWING QUESTIONS. (If yes, attach letter of explanation.)**

1. Have you incurred liabilities to pay alimony, child support or separate maintenance? (If "Yes," state annual amount and years in explanation.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Are there any outstanding judgements against you or have you had property foreclosed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Have you ever had any debt forgiven by a lender?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Have you ever declared bankruptcy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**PLEASE LIST YOUR CREDIT REFERENCES.**

Name	Account Number		
Address	City	State	Zip
Name	Account Number		
Address	City	State	Zip
Name	Account Number		
Address	City	State	Zip
Name	Account Number		
Address	City	State	Zip

PLEASE LIST THE PURPOSES FOR WHICH THE LOAN WILL BE USED			(To the nearest \$)
LOAN PURPOSE	COMMENT	APPLIED FOR	(FCS USE ONLY) APPROVED
1.		\$	\$
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
<b>TOTAL PURPOSES REQUESTED</b>		\$	\$

**PLEASE CHECK THE APPROPRIATE BOXES FOR OUR TRUTH-IN-LENDING DISCLOSURES.**

Credit is primarily for personal, family or household purposes.
  Loan will be used for construction or purchase of the principal residence.

The applicants expect to use the security as their principal residence.
  Credit is primarily for business, commercial, or agricultural purposes.

**PLEASE PROVIDE DETAILS OF THE PROPERTY TO BE OFFERED AS COLLATERAL.**

Legal Description: (Attach additional sheets, if necessary.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of acres: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Type of title evidence to be furnished:  Abstract  Title Insurance  Torrens Certificate

Collateral Ownership: \_\_\_\_\_ 1-Individual 2-Partnership 3-Corporation 4-Estate 5-Trust 6-Guardian 7-Combination

Names title will be held in: \_\_\_\_\_

Are mineral rights owned (to be owned)?  Yes  No If yes, how many acres? \_\_\_\_\_ What percent ownership? \_\_\_\_\_ %

Will water rights be offered as collateral?  Yes  No

**GRAZING PRIVILEGES OFFERED AS COLLATERAL**

Public Domain (Form 4144 Required): \_\_\_\_\_

Acres of State Lease (Lease Required): \_\_\_\_\_

National Forest (Form 4113 Required): \_\_\_\_\_

Grazing Association (Identify Assn.): \_\_\_\_\_

**PLEASE INDICATE YOUR PREFERRED LOAN TYPE/TERMS BELOW.**

Payment Plan:  1-Equal Payments     2-Decreasing Payments    Other: \_\_\_\_\_  
Product Type:     1 yr ARM     3 yr ARM     5 yr ARM     Variable Rate     Fixed Rate  
Payment Frequency:     Annual     Semi-Annual     Monthly     Quarterly     Other \_\_\_\_\_  
Loan Term (years): \_\_\_\_\_    Amortization Term (years): \_\_\_\_\_  
First Payment Due: \_\_\_\_\_

**PLEASE PROVIDE THE FOLLOWING ENVIRONMENTAL DISCLOSURES.**

- |  |   |
|--|---|
| <p>1. Is any property you own or are acquiring subject to any governmental notice of hazardous waste properties?<br/>If yes, explain: <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>Explain: _____</p> <p>2. Is there any existing or potential environmental contamination on any property you own or will acquire (toxic waste, asbestos, pesticide)?<br/>If yes, explain. <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>Explain: _____</p> <p>3. Have you disposed of any substances considered as toxic or hazardous or that might cause environmental contamination?<br/>If yes, explain. <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>Explain: _____</p> | <p>4. To your knowledge, are there any adjacent or nearby properties subject to environmental notice or on a governmental list of hazardous properties?<br/>If yes, explain. <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>Explain: _____</p> <p>5. Are there any known past practices on your property which would have contributed to hazardous waste contamination?<br/>If yes, explain. <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>Explain: _____</p> <p>6. Are there underground storage tanks on your property?<br/><input type="checkbox"/> Yes <input type="checkbox"/> No    If yes:<br/>What is their age (years)? _____    Have you obtained the proper permits?<br/>Are they in use? <input type="checkbox"/> Yes <input type="checkbox"/> No    <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>Number of Tanks _____<br/>Location _____</p> |
|--|---|

**REQUEST AND AUTHORIZATION**

I (we) certify that the information provided is true and correct to the best of my (our) knowledge and belief. Applicant acknowledges that the Association has made no commitment, express or implied, to extend credit and that nothing contained in this loan application and agreement shall be construed to commit the Association to extend new or renew existing credit to Applicant. If a loan is granted, I (we) subscribe for capital stock in the Association, as from time-to-time required, and apply for membership in the association.

Stock shall be carried on Association's books in the names of all Borrowers, if more than one, as joint tenants (unless Borrowers request otherwise in writing). We constitute and appoint \_\_\_\_\_ a joint owner of the stock, to act for and on behalf of all owners, with full power of substitution, to do and perform any and all lawful acts or things necessary, individually in his (her) name: (1) in the voting of said stock and in all other Association matters; (2) in accepting, receiving, and receipting for disclosures and the proceeds of the loan and stock. I/we the undersigned, in the absence of the party above designated to vote, hereby appoint \_\_\_\_\_ a joint owner of the stock, to act for and on behalf of all owners with full power of substitution. This authorization shall continue until such time as it is revoked by one or more owners of the stock. In the event credit is extended pursuant to this application, Applicant hereby authorizes the Association to withhold and pay from the loan proceeds; (a) such amounts as may be necessary to satisfy any or all existing liens upon property offered as security for the loan to Applicant; (b) the amount necessary to purchase stock in the Association in accordance with the requirements of the Association's bylaws; (c) any amount required by the Association's bylaws to be invested in equity reserve; and (d) any or all charges and fees assessed by the Association in connection with such extension of credit, including but not limited to loan service fees, filing or recording fees, notary fees, and any or all other charges or fees incident to the making of the loan to Applicant.

In conjunction with this application, I (we) agree and consent that the Association may obtain a credit report, employment and income verification, or any other information relating to my (our) financial position. Any person or firm is hereby authorized to provide such information requested by the Association.

In the event credit, in any amount, is extended to Applicant pursuant to this application, Applicant understands and agrees that such credit and any and all future extensions of credit by the Association are subject to the terms and conditions above, in addition to such other terms and conditions as may be contained in any promissory notes, additional advance applications, loan agreements, security agreements, financing statements, mortgages or deeds of trust, and any other instruments executed by Applicant in connection with such extension or extensions of credit.

**NOTICE TO CONSUMER**

1. Do not sign this application and agreement before you read it.
2. You are entitled to a copy of this application and agreement.
3. If your loan is to be secured by a lien on a residence, you have the right to a copy of any appraisal used in connection with your application for credit. If you wish a copy, please write to us at the Association. You may be required to reimburse the Association for the cost of the appraisal. We must hear from you no later than 90 days after we notify you about the action taken on your application or you withdraw your application.

**APPLICANT'S SIGNATURE**

Applicant(s)	<input type="checkbox"/> <b>DOES</b>	<input type="checkbox"/> <b>DOES NOT</b> want credit life insurance.	_____ (Initials)
Co-Applicant(s)	<input type="checkbox"/> <b>DOES</b>	<input type="checkbox"/> <b>DOES NOT</b> want credit life insurance.	_____ (Initials)
Co-Signer(s)	<input type="checkbox"/> <b>DOES</b>	<input type="checkbox"/> <b>DOES NOT</b> want credit life insurance.	_____ (Initials)
Applicant	<input type="checkbox"/> <b>DOES</b>	<input type="checkbox"/> <b>DOES NOT</b> want crop insurance.	_____ (Initials)

I/we understand that optional Credit Life Insurance is offered under separate application, subject to approval of the insurance company and that the Association will not discriminate against me if insurance is obtained elsewhere.

Will you be applying for the loan as: \_\_\_\_\_

1-Individual  
2-Proprietorship  
3-Joint Venture  
4-Partnership

5-Family Corporation  
6-Close Non-Farm Corp.  
7-Public Corporation  
9-Estate

10-Trust  
11-Guardian  
14-Combination  
50-Other

_____	_____	_____	_____
	Date		Date
_____	_____	_____	_____
	Date		Date
_____	_____	_____	_____
	Date		Date
_____	_____	_____	_____
	Date		Date
_____	_____	_____	_____
	Date		Date