

AgQuest EZ Application

Loan Application



SECTION 1: (Required by all Applicants)

Applicant is a: <input type="checkbox"/> Joint Operation <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company <small>¹ Submit legal entity documents with application.</small>			
Participating Cooperative Information:	Name of Participating Coop:	Location of branch where majority of participating coop business is conducted:	Name of Agronomy Rep:

APPLICANT INFORMATION

Applicant's Name:	Co-Applicant's Name:
TIN/SS#:	TIN/SS#:
Street Address:	Street Address:
City/State/Zip:	City/State/Zip:
County of Residence: No. of Years at Residence:	County of Residence: No. of Years at Residence:
County/Countries Farm in:	County/Countries Farm in:
Home Phone: Cell:	Home Phone: Cell:
E-Mail:	E-Mail:
Date of Birth: Yr Began Farming:	Date of Birth: Yr Began Farming:
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single
Spouse's Name:	Spouse's Name:
Spouse's SS#:	Spouse's SS#:

REQUESTED APPLICATION

Operating Loans	Amount Requested	Chattel	Amount Requested	Real Estate	Amount Requested
<input type="checkbox"/> Input Loan Only	\$	<input type="checkbox"/> Equipment Loan	\$	<input type="checkbox"/> Land (bare)	\$
<input type="checkbox"/> Full Operating	\$	<input type="checkbox"/> Equipment Lease	\$	<input type="checkbox"/> Land with Buildings	\$
		<input type="checkbox"/> Whole Equip Line	\$		
Total Relationship					\$

GENERAL INSURANCE INFORMATION

Insurance company name: <input type="checkbox"/> None	Agent name:
Insurance Co Address:	Phone:
Did you have a crop insurance claim within the last 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which year: <input type="checkbox"/> 2002 <input type="checkbox"/> 2001 <input type="checkbox"/> 2000 <input type="checkbox"/> 1999 <input type="checkbox"/> 1998	Is Crop insurance premium current? <input type="checkbox"/> Yes <input type="checkbox"/> No
Property Insurance Co name:	Agent name:
Property Insurance address:	Phone:

SECTION 2: (1 Primary Lender and 1 Supplier required on all loan requests less than \$100,000)
(All fields required on all loan request greater than \$100,000)

REFERENCES

Primary Lender:	Contact:	
Checking #:	Loan #:	Phone:
Secondary Lender:	Contact:	
Checking#:	Loan #:	Phone:

SUPPLIERS

Name:	Contact:	Phone:
Name:	Contact:	Phone:

APPLICANT (A) / CO-APPLICANT (CA) GENERAL CREDIT INFORMATION

1) Are there any unsatisfied judgments against you?	(A) <input type="checkbox"/> Yes <input type="checkbox"/> No (CA) <input type="checkbox"/> Yes <input type="checkbox"/> No	5) Are you obligated to pay alimony, child support or separate maintenance?	(A) <input type="checkbox"/> Yes <input type="checkbox"/> No (CA) <input type="checkbox"/> Yes <input type="checkbox"/> No
2) Have you ever filed bankruptcy?	(A) <input type="checkbox"/> Yes <input type="checkbox"/> No (CA) <input type="checkbox"/> Yes <input type="checkbox"/> No	6) Do you sell farm products under another name?	(A) <input type="checkbox"/> Yes <input type="checkbox"/> No (CA) <input type="checkbox"/> Yes <input type="checkbox"/> No
3) Are you a participant in any pending lawsuit?	(A) <input type="checkbox"/> Yes <input type="checkbox"/> No (CA) <input type="checkbox"/> Yes <input type="checkbox"/> No	7) Are you a co-maker, co-signor or guarantor on any loans?	(A) <input type="checkbox"/> Yes <input type="checkbox"/> No (CA) <input type="checkbox"/> Yes <input type="checkbox"/> No
4) Are any accounts past due, in default or in dispute?	(A) <input type="checkbox"/> Yes <input type="checkbox"/> No (CA) <input type="checkbox"/> Yes <input type="checkbox"/> No	8) Are you involved in (or part of) any Partnership, Corporations, or other business entity?	(A) <input type="checkbox"/> Yes <input type="checkbox"/> No (CA) <input type="checkbox"/> Yes <input type="checkbox"/> No
The answers above are assumed those of the applicant and/or co-applicant. If that is not correct, or if any of questions were answered yes, please explain in the space below:			

Disclosures, Signatures and Authorizations

By signing below, 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. We consent to any credit and employment investigation necessary to act on or verify the supplied information and acknowledge that we may be asked to provide additional information. Upon receipt of the application, applicant shall be notified by a representative of AgQuest or the participating cooperative as to the additional information needed to formalize applicant's loan request.

Applicant Signature

Date

Co-Applicant Signature

Date

AgQuest EZ Application

Crop Income & Expense Worksheet



SECTION 3-A (Required for Crop Operating Loan Request)

Crop Income Projections		PROVEN YIELD	Applicants Share	PRICE*	TOTAL	ADV %	Amount of Financing Available
CROP	ACRES						
Corn			%	\$	\$	90%	\$
Soybeans			%	\$	\$	90%	\$
Specialty Crops			%	\$	\$	70%	\$
			%	\$	\$		\$
Total Acres							
				Total Crop Income	\$	\$ Avail.	\$
				Projected \$/Acre	\$	Finance per Acre	\$

Are any crops fed to livestock? Yes No If yes, how much? _____

SECTION 3-B: (Required on all loan request greater than \$100,000)(Attach entire cash flow if Possible)

INPUT COST EXPENSE			Cost / Acre	Total \$	OTHER EXPENSE			Cost / Acre	Total \$
Seed	\$			\$	Labor	\$		\$	
Fertilizer	\$			\$	Repairs	\$		\$	
Chemical	\$			\$	Rent (land)	\$		\$	
Ag Services	\$			\$	Custom Hire	\$		\$	
Petroleum	\$			\$	Taxes (property)	\$		\$	
					Insurance (crop)	\$		\$	
					Insurance (property)	\$		\$	
TOTALS:	\$			\$	Supplies	\$		\$	
					Dues & Subscriptions	\$		\$	
					Legal & Professional	\$		\$	
					Car & Truck	\$		\$	
					Utilities	\$		\$	
					Miscellaneous	\$		\$	
					Family Living	\$		\$	
					Other	\$		\$	
					Total Other Expenses:	\$		\$	
					TOTAL EXPENSES:	\$		\$	
					NET CASH FLOW:	\$		\$	

SECTION 4: (To be completed on all equipment loan and lease requests)

1. Fully describe the item(s) to be financed (include year, make, model, hours and serial number) (if the loan request is for the funding of the applicant's entire inventory of machinery and equipment, attach an equipment inventory list):

2. Is the equipment: New or Used

3. Estimated purchase price: _____ Requested Loan Amount: _____

4. Equipment to be purchased from (Seller / Dealer's name, address & phone#): _____

5. To your knowledge, will the equipment to be financed be used for custom work?

Yes No If yes, estimate usage level (hrs/yr or acres/yr or miles/yr)

6. Requested Term: 2 YR 3 YR 4 YR 5 YR 7 YR

(Two and Four year interest rates are not routinely quoted but will be provided upon request)

7. Requested Pymt Frequency: Monthly Quarterly Semi-Annual Annual

8. Lease: Term (yrs): _____ Purchase Option: _____ Advance: 1 Payment/2 Payment Payment Amount: _____

SECTION 5: (To be completed on all real estate loan requests)

1. Fully describe Real Estate to be financed (# Acres, Buildings, Etc.)

State _____ County _____ Section _____ Township _____ Range _____

2. Estimated Purchase Price or Fair Market Value: _____ Requested Loan Amount: _____

3. Requested Amortization: _____ Years _____

4. Payment Frequency: Monthly Quarterly Semi - Annual Annual

5. Current Owner of Real Estate: _____