



# LOAN APPLICATION

AMOUNT REQUESTED: \$ \_\_\_\_\_ TERMS REQUESTED: \_\_\_\_\_

PURPOSE (check all that apply):  Real Estate  Equipment  Livestock  Line of Credit  Refinance

Source of downpayment: \_\_\_\_\_ Will you occupy the offered security as your primary residence?  No  Yes

Do you own a partnership or corporation?  No  Yes (If "yes") Specify: \_\_\_\_\_

Do you own or operate a farm or other agricultural enterprise?  No  Yes (If "yes") Year Began Farming: \_\_\_\_\_

Principal agricultural product(s): \_\_\_\_\_ Place of Operation(s): \_\_\_\_\_ Gross Ag Sales: \$ \_\_\_\_\_

**APPLICANT INFORMATION:**

Name	Date of Birth	Soc. Sec. No. or Tax ID	Are you a U.S. Citizen ? <input type="checkbox"/> No <input type="checkbox"/> Yes
Address	City	State	Zip
Years at Residence _____			
Home Phone: _____	Work: _____	Cell: _____	e-mail: _____
Occupation: _____	Employer: _____	How Long? _____	Monthly Income: _____
Other Income: \$ _____ Source: _____			
Home Mortgage/Rent: \$ _____/mo. Real estate taxes: \$ _____ Insurance premium: \$ _____ HOA dues: \$ _____			
Other Monthly Obligations: \$ _____ Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced/Separated			

**CO-APPLICANT INFORMATION:**

Name	Date of Birth	Soc. Sec. No. or Tax ID	Relationship to Applicant: _____ Are you a U.S. Citizen ? <input type="checkbox"/> No <input type="checkbox"/> Yes
Address (if same as above, write "same")	City	State	Zip
Years at Residence _____			
Home Phone: _____	Work: _____	Cell: _____	e-mail: _____
Occupation: _____	Employer: _____	How Long? _____	Monthly Income: _____
Other Income: \$ _____ Source: _____			
Home Mortgage/Rent: \$ _____/mo. Real estate taxes: \$ _____ Insurance premium: \$ _____ HOA dues: \$ _____			
Other Monthly Obligations: \$ _____ Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced/Separated			

Is the applicant, co-applicant, or any recipient of the loan proceeds a director or employee of any Farm Credit System institution, a Farm Credit Administration employee, or a relative of any such director or employee?  No  Yes  
(If "yes") Specify relationship and organization: \_\_\_\_\_

Has the applicant or co-applicant ever filed bankruptcy?  No  Yes (If "yes") Specify: \_\_\_\_\_ Year: \_\_\_\_\_

Are unpaid taxes or judgments owed by applicant or co-applicant?  No  Yes (If "yes") Specify: \_\_\_\_\_

**COLLATERAL:** Attach a copy of sales contract with full legal description or a copy of sales invoice with full description including serial and model number, if applicable. If Lender requires an appraisal on the proposed collateral, the undersigned agrees to pay the fee for such appraisal.

**NOTICE:** The undersigned hereby applies for credit from AgriLand, Farm Credit Services (the Association) in the amount indicated above plus the required Association stock or participation certificates, and processing and closing fees. The undersigned authorizes the Association to obtain such credit reports, account balances, employment and income verification, and other information as may be required in connection with this application for credit, or in connection with the review or collection of any loan resulting from the same, including any future renewals, additions and extensions thereof. The undersigned represents statements herein as true and correct and acknowledges that the Association is protected by federal statutes which make it a criminal offense to misrepresent facts or sell or convert property mortgaged to the Association, and/or its assigns.

Applicant signature \_\_\_\_\_ date \_\_\_\_\_

Co-applicant signature \_\_\_\_\_ date \_\_\_\_\_