1. **Borrower**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|        |  |       |  |       |
| Applicant (corp or partnership name if applicable) |  | SSN or Tax ID Number |  | Date of Birth or Incorporation |
|       |  |       |  |       |
| Co-Applicant / Spouse |  | SSN |  | Years farming |
|  |  |       |  |       |
| Mailing Address |  | City, State |  | Zip |
|       |  |       |  |       |
| Business Phone #  |  | Mobile Phone # |  | Email Address |

 [ ]  Proprietorship

 [ ]  Partnership

 [ ]  Corporation

If a Partnership, list all partners. If a corporation, list the corporate officers with percent of ownership:

 [ ]  Single [ ]  Separated [ ]  Married

 If married does a premarital arrangement exist separating spouse from farming business? [ ] Yes [ ]  No

1. **Affiliated Entities** *(please list all that you have an interest in; include Corporations, Partnerships, Farm Names, etc.)*

1. **Questions**

**Borrower**

[ ]  Agree [ ]  Disagree I am not a defendant in any suits or legal actions

[ ]  Agree [ ]  Disagree There are no judgements outstanding against me or any of my affiliated entities

[ ]  Agree [ ]  Disagree I have not been and/or am not now involved in bankruptcy

[ ]  Agree [ ]  Disagree I have no other-lender provided crop production loans to me or any of my affiliated entities

[ ]  Agree [ ]  Disagree I earn 100% of my income from farming operations

[ ]  Agree [ ]  Disagree I am within 47 miles of an Ag Resource Management lending location

**Collateral**

[ ]  Agree [ ]  Disagree I am in good standing with the FSA (eligible for federal farm programs and not delinquent on any FSA debt)

[ ]  Agree [ ]  Disagree I have not yet received any FSA payments indicated as collateral for this loan

[ ]  Agree [ ]  Disagree I have Federal Crop Insurance in force

[ ]  Agree [ ]  Disagree I am in good standing with Federal Crop Insurance

[ ]  Agree [ ]  Disagree I have no outstanding past due Federal Crop Insurance premiums

[ ]  Agree [ ]  Disagree I have no outstanding liens on the crops involved in this loan

[ ]  Agree [ ]  Disagree I have no crops booked for this crop year or other outstanding crop contract liabilities

**Operational**

[ ]  Agree [ ]  Disagree I have the ability to plant my own crops.

[ ]  Agree [ ]  Disagree I have the ability to harvest my own crops.

[ ]  Agree [ ]  Disagree I have all equipment obligations met and/or factored into the loan.

[ ]  Agree [ ]  Disagree I have made provisions for all other necessary cash outlays, which are not included in the ARM budget.

[ ]  Agree [ ]  Disagree I have no third-party credit available (PHI, Monsanto, FarmPlan, etc.)

If you disagree, with any of the above questions, please provide detail:

1. **References** *(List three Farm Supplier Creditor References with contact information)*

1. **Guarantors** *(Please provide name, physical address, and DOB of all Guarantors)*

1. **Crops** *(Please list your whole farm average yields)*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Crop/Practice | 2017 | 2016 | 2015 | 2014 | 2013 | 2012 |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |

1. **Crop Buyers** *(List the prospective Buyer(s) of your crop. Please provide mailing address and contact information including phone and email)*

1. **Crop Contracts** *(Please list and attach copies of open grain contracts)*

1. **Crop Rebates** *(Which Buyer/Gin/Elevator do you use and what has been their average rebate**)*

1. **Farms** *(Please list all tillable acres by individual farms and attach a copy of lease agreements)*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| County | FSN | Crop | Practice | Irr/Non-Irr? | Landlord | Acres | Rent | APH |
|       |       |  |  |       |       |       |       |       |
|       |       |  |  |       |       |       |       |       |
|       |       |  |  |       |       |       |       |       |
|       |       |  |  |       |       |       |       |       |
|       |       |  |  |       |       |       |       |       |
|       |       |  |  |       |       |       |       |       |
|       |       |  |  |       |       |       |       |       |
|       |       |  |  |       |       |       |       |       |
|       |       |  |  |       |       |       |       |       |
|       |       |  |  |       |       |       |       |       |
|       |       |  |  |       |       |       |       |       |
|       |       |  |  |       |       |       |       |       |

1. **Crop Insurance**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| St / County | Crop | Practice | MPCI Type | Level | Stax/SCO |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|        |  |       |  |       |
| Crop Insurance Agent |  | City, State |  | Phone and/or email |

1. **Budget** *(Mark (Y/N) if you are requesting that ARM supply the budgeted expense in this crop loan)*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | (Y/N)  | Corn | Soybeans |       |       |       |       |       |
| Fertilizer |  |       |       |       |       |       |       |       |
| Seed |  |       |       |       |       |       |       |       |
| Fungicide |  |       |       |       |       |       |       |       |
| Herbicide |  |       |       |       |       |       |       |       |
| Insecticide |  |       |       |       |       |       |       |       |
| Custom |  |       |       |       |       |       |       |       |
| Fuel |  |       |       |       |       |       |       |       |
| Labor |  |       |       |       |       |       |       |       |
| Repairs |  |       |       |       |       |       |       |       |
| Insurance |  |       |       |       |       |       |       |       |
| Harvesting |  |       |       |       |       |       |       |       |
| Other  |  |       |       |       |       |       |       |       |
| Other |  |       |       |       |       |       |       |       |
| Other |  |       |       |       |       |       |       |       |

1. **Credit Application, Authorization for Release of Credit Information, and Agreement for Credit Application Expenses**

I/We realize that you expect to investigate my/our credit in connection with my/our application for a loan. I/we authorize you to obtain a written or oral credit report from any credit reporting agency.

I/we further authorize you to obtain information and to make other inquiries you deem necessary from my/our legal counsel.

I/we further authorize you to obtain an investigation report including information as to character, general reputation, personal characteristics, and mode of living, and to make other inquires you deem necessary to verify the accuracy of the statements made herein. You are authorized to answer questions about your credit experience with the undersigned.

I/we further authorize you to obtain any information necessary from USDA/FSA/NRCS including but not limited to: Payment information, Acreage Reports, and Farm Plan information.

I/we further authorize any bank or creditor with whom I/we are doing business to give any and all necessary information to you which will assist in your credit investigation and release any claim I/we may have for breach of contract or invasion of privacy because of information furnished to you.

I/we understand that only an officer of Agrifund, LLC (“ARM”), has the authority to approve this loan application.

This application and any schedule, explanations, or additional information attached, is submitted on behalf of the undersigned for the purpose of procuring, establishing and maintaining credit from time to time with ARM. The undersigned has carefully read the information contained herein and warrants it to be complete, true, and correct as or the dates set forth below and that ARM may continue to rely upon this application continuing to be true and correct until a written notice of change is given to you by the undersigned.

Further, the undersigned agrees that this application shall remain the property of ARM, 1401 Hudson Ln. Suite 300 Monroe, LA 71201

For purpose of securing credit from time to time, the Financial Statement included herewith is certified to be true and correct as of this date.

The undersigned agrees to pay ARM the stated and invoiced loan origination fees for each approved loan application. In the event that the application is not approved, the undersigned agrees to reimburse ARM for the direct expenses related to processing this application where legal fees, appraisals, and other consultants are involved.

The undersigned understand and agree that as a condition to ARM’s approval of this application, the undersigned will be required to execute and furnish to ARM certain instruments and agreements in order to evidence and secure such extension of credit, including, but not limited to, a promissory note, security agreement, financing statement, guaranty (if applicable) and such other forms and agreements as required or necessary to comply with ARM’s policies and procedures concerning the extension of agricultural credit. The undersigned further agree and acknowledge that this application for credit may only be approved in writing by an authorized officer of ARM, at its offices in Rayville, La. and that credit will not be extended nor will products be delivered to the undersigned until the written approval of the undersigned’s application and the satisfaction and performance by the undersigned of all conditions and requirements imposed by ARM in connection herewith.

The undersigned expressly acknowledge and agree that neither the execution and submission of this agricultural credit application nor the execution by the undersigned of any instruments or agreements evidencing indebtedness or granting a security interest as required in connection with the processing of this application shall constitute or be deemed to constitute a commitment or agreement on the part of ARM to extend credit to the undersigned in any amount whatsoever.

I understand that a certain level of crop insurance may influence the credit decision. Furthermore, I understand that I may purchase this crop insurance from any licensed agent, and specifically am not required to purchase that insurance from ARM as a condition of approval of credit.

Date \_\_\_\_\_\_\_\_\_\_\_

 Applicant

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Co-Applicant

**Documentation Checklist**

[ ]  Photocopy of state issued photo ID for applicant and all guarantors

[ ]  Copy of corporate resolutions and entity documents (i.e. By-laws, operating agreements, etc.)

[ ]  Copy of current financials including debt schedule and equipment list on all Borrowers and Co-Borrowers

[ ]  Copies of farm leases

[ ]  Copy of crop insurance APH databases

[ ]  Copies of FSA payment information

[ ]  Copies of all crop contracts

[ ]  Proof of available Third-Party Credit