



# Customer Application

Fax to (940) 864-3468

All the information in this application and all attachments is correct to the best of my knowledge. I authorize verification of employment and all financial and other information submitted with this application, including obtaining a credit report, to act on this application. I authorize making continued inquiries about such information and obtaining a credit report during the term of my lease(s) as necessary to administer my lease(s). As required by law, my identity will be verified. I authorize all past or present creditors to release any and all necessary credit information, and to respond fully to requests form information based on this application when transmitted by electronic or other means. The above permissions and authorizations will apply to any creditor to whom this application is submitted. I certify that the lease(s) applied for hereunder are for business, commercial, or agricultural purposes and not for personal, family, or household purposes.

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 that 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. A number of federal agencies share enforcement responsibility for this law. Determining which agency to contact depends on the type of creditor you dealt with. Consult the creditor to whom this application is addressed for information on its regulator, or contact The Federal Trade Commission, Consumer Response Center, Washington D.C. 20580, 1-877-382-4357.

I authorize any lessor making a lease applied for hereby to disclose to you, on a confidential basis, my personal, credit and other information (including without limitation post-closing information regarding the servicing of the lease and any defaults thereunder), whether or not you are a servicer of the lease.

\_\_\_\_\_  
Signature Date Signature Date  
\_\_\_\_\_  
(please print or type individual's name) (Title-corporations only) (please print or type individual's name) (Title-corporations only)

Name(s) Individual or legal name of corporation, partnership, or organization	Contact
	Title (if corporation)
	Email address

<b>SECTION A</b>					<input type="checkbox"/> <b>Application on file</b> - Skip sections A and B, Start with Section C				
Address			Phone number		Mobile phone number				
City		State	County	Zip code		Fax number			
Billing name		Same as above		Attention		Title			
Billing address									
City			State		Zip code		Phone number		
<input type="checkbox"/> Individual/Sole proprietorship	<input type="checkbox"/> General partnership*		<input type="checkbox"/> Limited liability company*						
<input type="checkbox"/> Corporation*	<input type="checkbox"/> Limited partnership*		<input type="checkbox"/> Other						
*If corporation, partnership, or LLC attach either articles of incorporation, partnership agreement, or LLC articles of organization									
State of Incorporation					Date of Incorporation				
Briefly describe operation									
Year Began Farming (Producer)					Federal ID number (or Social Security number, if individual)				

<b>SECTION B</b>	Yes	No		Yes	No
Are there any unsatisfied judgments against you?	<input type="checkbox"/>	<input type="checkbox"/>	Are you a co-maker, co-signer, or guarantor on any financial obligations?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been declared bankrupt in the last ten years?	<input type="checkbox"/>	<input type="checkbox"/>	Are any accounts past due?	<input type="checkbox"/>	<input type="checkbox"/>
Are you a defendant in any pending lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>			
If you have answered "Yes" to any of the above questions, please give details (Use separate sheet if necessary).					

<b>PRINCIPAL INFORMATION</b>						
Principal name+	Address/City/State/Zip code	Providing Guaranty?	Social Security #	# of Years Owned Business	Title (if corporation)	Ownership %
		<input type="checkbox"/> YES <input type="checkbox"/> NO				
		<input type="checkbox"/> YES <input type="checkbox"/> NO				
		<input type="checkbox"/> YES <input type="checkbox"/> NO				
		<input type="checkbox"/> YES <input type="checkbox"/> NO				
+Provide legible copy of each principal(s) or guarantor(s) driver's license						

<b>SECTION C</b>			
<b>Assets</b>		<b>Liabilities</b>	
Current Assets		Current Liabilities	
Cash/Savings		Accounts payable	
Marketable Securities		Current Portion of Long Term Debt	
Accounts receivable		_____	
Harvest Crops		_____	
Investment in Growing Crops		_____	
Livestock # _____ of head		_____	
_____		_____	
<b>Total Current Assets</b>		<b>Total Current Liabilities</b>	
<b>Fixed Assets</b>		<b>Long-term Liabilities</b>	
Machinery & Equipment		Mortgage	
Vehicles		Equipment - term loans/capital leases	
Farm & Ranch Land # _____ of acres		Other long-term liabilities	
Other (list)		<b>Total Long-Term Liabilities</b>	
_____		_____	
_____		<b>Total Liabilities</b>	
<b>Total Fixed Assets</b>		<b>Total Net Worth</b>	
<b>TOTAL ASSETS</b>		<b>TOTAL LIABILITIES &amp; NET WORTH</b>	

<b>SECTION D Credit References</b>					
Checking/ Savings Name	Person to contact	Phone Number	City/ State	Acct/ Loan Number	Acct Balance:
					\$
Operating Lender Name					High \$
					<u>Bal</u>
Mortgage Holder Name					High \$
					<u>Bal</u>
Equipment contract holders/ Other Name					High \$
					<u>Bal</u>
<b>INCOME SUMMARY</b>					
Crop Type(s) / Total Acres					Gross Crop Income
					\$
Livestock Type(s) / # Of Head					Gross Livestock Income
					\$
Other Income/ Describe					Total Other Income
					\$

<b>SECTION E</b>
Total Acres Farmed:
Acres Owned:
Acres Leased:

<b>SECTION F</b>			
Equipment to be Purchased	Dealer Name	Salesman Name	
Phone Number	Equipment to Purchase	Purchase Price	Down Payment