



Customer Application

Names(s) Individual or full legal name of corporation, partnership or other legal entity	Date
	Contact
	Title (if legal entity)
CCAN#	Email Address

SECTION A				
Address		Phone number	Mobile phone number	
City	State	County	Zip code	Fax number
Billing name	Same as above <input type="checkbox"/>	Attention	Title	
Billing address				
City	State	Zip code	Phone number	

SECTION B				
<input type="checkbox"/> Individual/Sole proprietorship	<input type="checkbox"/> General partnership*	<input type="checkbox"/> Limited liability company (board managed)*		
<input type="checkbox"/> Corporation*	<input type="checkbox"/> Limited partnership*	<input type="checkbox"/> Limited liability company (member managed – no board)		
<input type="checkbox"/> Other				
*If corporation, partnership, or LLC attach either articles of incorporation, partnership agreement, or LLC articles of organization. If corporation or LLC, also include bylaws, operating agreement or similar organizational document. If Other, include applicable formation/organizational document(s)				
State of Organization		Date of Organization		
Briefly describe operation				
Year Began Farming (Producer)		Federal Tax ID number (or Social Security number, if individual)		

SECTION C - PRINCIPAL INFORMATION						
Principal name+	Address/City/State/Zip code	Providing Guaranty?	Social Security #	# of Years Owned Business	Title (if legal entity entity)	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				

SECTION D				Fiscal Year End Date:	
Assets			Liabilities and Net Worth		
Cash/Savings	\$		Current Portion Long Term Debt	\$	
Accounts Receivable	\$		Total Liabilities	\$	
Total Assets	\$		Total Net Worth	\$	
Income Summary (Most Recent Complete Year)					
Annual Interest Expense	\$		Total Annual Net Farm Income	\$	

All information provided in this application and all attachments is correct to the best of my knowledge. I understand this application will be retained whether or not it is approved. I also understand that, as required by Federal laws targeting terrorism funding and money laundering activities, FCL will collect information about me and take actions necessary to verify my identity.

I hereby authorize verification of employment, financial and all other information submitted to FCL in connection with this application, including obtaining a credit report. I understand and agree that this application may be transmitted to creditors by fax or other electronic means. I authorize all past or present creditors to release any and all necessary credit information, and to respond fully to requests for information based on this electronically transmitted application.

I agree that FCL may disclose, on a confidential basis, my financial and other information to third parties, whether part of the Farm Credit System or not, as part of their acquiring or maintaining an interest in my lease(s), whether as a co-lessor, participant, syndicator, guarantor, assignee or in any other similar capacity.

I understand that FCL uses third-party service providers in connection with processing applications and servicing leases. I hereby authorize FCL to disclose my information to such third-party service providers on a confidential basis.

I authorize FCL to make such inquiries and gather such information from time to time during the term of my lease(s) as it deems necessary and reasonable to administer my lease(s), including making credit inquiries, verifying credit or employment, and obtaining credit agency reports regarding me and by business.

I hereby authorize FCL to file, at any time, any UCC financing statement and/or fixture or other filing, showing all or any of the undersigned as Debtor, as FCL may require in connection with any item of equipment described in this or any future application, all without the undersigned Debtor's authentication, to the maximum extent permitted by applicable law.

This lease application includes all supplements and all additional information requested by FCL, which are incorporated by reference in full and made a part of this lease application. I understand that my signature on this application will be considered also a signature on each of the supplements supplied with the application, with the same legal effect as my signing each supplement.

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. The Federal agency that administers compliance with this law is the Farm Credit Administration, 1501 Farm Credit Drive, McLean, Virginia 22102-5090.

I understand that this application may be used in whole or in part by FCL in analyzing my future lease application(s). I agree that the information provided herein and the statements made above will continue to apply to all future transactions under this application unless I notify FCL in writing to the contrary. I certify that the lease(s) applied for hereunder are for business, commercial or agricultural purposes and not for personal, family or household purposes.

Signature	Date	Signature	Date
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(please print or type individual's name)	(Title-legal entities only)	(please print or type individual's name)	(Title-legal entities only)
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