

Agri Business Finance Loan Application

Primary Applicant Information

Name: _____ SSN# or EIN#: _____

Address: _____ Phone Number: _____

City, State, Zip: _____ County (s) Farmed: _____

Applicant is a (select one) Corporation Partnership Individual Other: _____

If applying as a corporation, LLC or partnership, please list officers, partners, etc. Additionally please attach articles of incorporation or partnership agreement.

Co-Applicant Information (Required if Primary Applicant is married and applying as an individual.)

Name: _____ SSN# or EIN#: _____

Address: _____ Phone Number: _____

City, State, Zip: _____ County (s) Farmed: _____

Budget/Credit Request

	Budgeted Amount	Credit Amt. Needed
Crop inputs from Kova retailer:	_____	_____
Cash Rents:	_____	_____
Repairs:	_____	_____
Fuel:	_____	_____
Other: _____	_____	_____
Other: _____	_____	_____
Total:	_____	_____

Credit References

Provide Agri Business Finance, Inc. with credit references. These references may or may not be used in determining credit worthiness.

Lending Institution	Contact Name	Contact Number

Crop Insurance Information

Crop Insurance Agent: _____ Agent Phone: _____

	<i>Corn</i>	<i>Soybeans</i>	<i>Wheat</i>	<i>Other</i>
<i>Type of Policy (CRC, RA, MPCI)</i>				
<i>Level of Coverage (65%, 70%, etc.)</i>				

General Credit Information

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Are there any unsatisfied judgements against you? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does anyone else own any interest in any property/items owned by you? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are you a participant in any pending lawsuits? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are any accounts past due, in default or in dispute? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Do you lease any equipment, buildings, vehicles or other? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you ever filed for bankruptcy? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are you a part of any legal partnership, corporation or business entity? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Do you do any business under any name(s) other than that on the application? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Do you sign, guarantee or endorse any notes for anyone not on this application? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Have you filed all necessary federal and state income tax returns? | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Do you participate in Government Farm Programs? If yes, list counties. | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Is applicant, or co-applicant employed off farm? If yes, provide employer and salary. | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. What year did you begin farming? | _____ | |

If you answered "yes" to any of the above questions, please indicate question number and provide a brief explanation.

I certify that everything I have stated in this application and on any attachments is correct. You may keep this application whether or not it is approved. By signing below I authorize you to check my credit and employment history and to answer questions others may ask about my credit record with you. I understand that I must update credit information at your request if my financial condition changes.

The Indiana Laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request.

Applicant's Signature: _____ Date: _____

Co-Applicant's Signature: _____ Date: _____

Direct questions to Paul Barnard at (812) 663-5081

Remit to: Agri Business Finance, Inc., 1330 N. Anderson St., Greensburg, IN 47240