



OPERATING LINE OF CREDIT APPLICATION

APPLICANT(S) INFORMATION (Complete Information as Applicable):			
Name:	Social Security or Tax I.D. Number	Date of Birth	Marital Status (For secured loans only)
1.			<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated
2.			
3.			
4.			
Billing Address:	County:	Home Phone:	Business Phone:

DESCRIBE YOUR REQUEST:	
<p>What is the purpose and amount of the loan?</p> <input type="checkbox"/> Are you a patron of Equity? (If checked, specify how many years):	<p>Description/Desired Loan Amount:</p> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> _____ \$ _____ </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> _____ \$ _____ </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> _____ \$ _____ </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> _____ \$ _____ </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> _____ \$ _____ </div> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black;"> _____ \$ _____ </div> <p style="text-align: right;">Total Loan Amount \$ _____</p>
<input type="checkbox"/> I am new customer to Equity and their services/programs	

DESCRIBE PAYMENT PLAN:	COLLATERAL OFFERED:
<p>Specified Loan Term (how many months/years):</p>	

DESCRIBE YOUR FARM			
What products do you sell?	What year did you begin farming?	How many acres do you own?	How many acres do you rent?
Do you plan any major changes in your operation within the next 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No			
(If yes, please describe below) :			

CONCISE BALANCE SHEET (Must complete full-detailed balance sheet provided):		
Annual Farm Income:	Assets:	Liabilities:
Employer:	Short Term: \$	Short Term: \$
	Intermediate Term: \$	Intermediate Term: \$
Non-Farm Income (include off-farm job, S.S., etc.):	Long-Term: \$	Long-Term: \$
	Personal: \$	Personal: \$
Total Farm Income:	Total Assets:	Total Liabilities:
		Total Net worth (Assets-Liabilities):

GENERAL CREDIT INFORMATION:		Please explain any "yes" questions:
Are there any unsatisfied judgments against any borrower?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you been a debtor in bankruptcy in the last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you a party to a lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are any of your taxes delinquent or under dispute?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you obligated to pay alimony, child support, or separate maintenance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you obligated to as a cosigner or guarantor on any other obligations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Does anyone else own an interest in the property listed on the balance sheet?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you or an immediate family member an employee or director of a Equity L.C.C.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have any underground storage tanks? (If yes, describe size, contents, age)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you aware of any potential hazardous waste located on your farm?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

INSURANCE INFORMATION:	
Please provide insurance (Crop, Farm, Etc.) information:	
Company:	Agent's Name:
Company's Address:	Agent's Number:

SIGNATURES AND AUTHORIZATIONS:			
<p>By signing below, we certify that this information, together with any accompanying schedule(s), is a true and correct and complete statement of our financial condition as the date indicated and that our financial condition has not materially changed. We understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements in this application as applicable under the provisions of Title 18, United States Code, Section 1014. WE UNDERSTAND THAT IF INSURANCE IS REQUIRED AS A CONDITION OF OUR LOAN APPROVAL, SUCH INSURANCE MAY BE OBTAINED FROM AN INSURANER OF OUR CHOICE. If this loan is approved, we agree to furnish at our expense such title evidence as may be required to establish the necessary lien position on the property offered as security for this loan. We consent to any credit and employment investigation necessary to act on or verify the supplied information. PHOTOCOPIES OF THIS AUTHORIZATION MAY BE PRESENTED TO AND RELIED UPON AS OUR AUTHORIZATION TO RELEASE INFORMATION TO EQUITY LIVESTOCK CREDIT CORPORATION.</p>			

Date Signed			
_____	_____	_____	_____
Signature	Date	Signature	Date
_____	_____	_____	_____
Signature	Date	Signature	Date



BALANCE SHEET

STATEMENT OF:

Individual, Corporation, Partnership, Trust checkboxes

List all assets at fair market value. List all debts to whom owed, interest rates, and payments. Attach additional sheets if more space is required.

AS OF

Month Day Year

Main balance sheet table with sections: 1. CURRENT ASSETS, 2. INTERMEDIATE ASSETS, 3. LONG TERM ASSETS, 4. TOTAL ASSETS, 5. CURRENT LIABILITIES, 6. INTERMEDIATE LIABILITIES, 7. LONG TERM LIABILITIES, 8. TOTAL LIABILITIES, 9. NET WORTH

Lease Obligations: None, Amt Due in 12 Mos., Total Unpaid Bal.

ADDITIONAL INFORMATION section with questions and Yes/No checkboxes

SIGNATURES AND AUTHORIZATIONS

By signing below, we certify that this information, together with any accompanying schedule(s), is a true and correct and complete statement of our financial condition as of the date indicated...

Signature lines for individuals and entities

LOAN NO., LN. OFF. NO., CUSTOMER SHORT NAME fields

BALANCE SHEET

Equity Livestock Credit Corporation

AUTHORIZATION FOR RELEASE OF INFORMATION TO LENDER

Date: _____

Customer: _____

Address: _____

EMAIL Address: _____

I/We are current customers of, or I/we have applied for a loan, loan contract revision or a Feeding Contract from, Equity Livestock Credit Corporation (Lender) and hereby agree that:

1. Lender is authorized to make credit checks or inquiries concerning my/our creditworthiness, credit standing, credit capacity (including obtaining copies of Income Tax Returns), character, any matters relating to assets, liabilities, and references;
2. Creditors, including but not limited to credit reporting agencies, state and national banks, Farm Credit System institutions, the Farm Service Agency (FSA), insurance companies, and others, are hereby authorized to disclose to Lender any information relative to the above items and any of my/our loans, accounts, purchases, transactions, production or marketing information, or other pertinent information, whether past, present, or future;
3. My/Our employer is hereby authorized to release to Lender such information as Lender may request including, but not limited to, salary, position, and length of service;
4. The Farm Service Agency (FSA), the Natural Resources Conservation Service (NRCS), and other local, county, state, and federal agencies are authorized to make available all aerial maps, land descriptions, water and soil data, commensurate or base property qualifications, grazing survey data, crop yield or production data, government program payment information, and other pertinent data covering any real estate owned, rented, operated, and/or optioned by me/us;
5. Lender is authorized to share with credit reporting agencies and creditors doing business with me/us any information regarding any extension(s) of credit or loan servicing action(s) and my/our general credit history.
6. Photocopies, faxes, and other electronic transmissions of this authorization may be presented to and relied upon by my/our creditors, local, county, state, and federal agencies, and by others, including, but not limited to, attorneys, accountants (for Tax Returns), and farm and ranch managers, as evidence of my/our authorization to release information to Lender, and
7. This authorization shall continue in full force and effect as long as I/we have a loan or pending application with Lender. Third parties may rely upon Lender's presentation of this form as evidence of such loan or pending application.

I/We hereby release and agree to save and hold Lender and other persons named herein, including their directors, officers, employees, and agents harmless from any liability, which might arise at any time from the release of this information.

Signatures:

(Name)

(Name)

(Name)

(Name)

(Date)