



Customer Application

Fax to (940) 864-3468

Information provided in this application is correct to the best of my knowledge. I understand this application for a lease from Farm Credit Leasing Services Corporation (FCL) will be retained whether or not it is approved. You and FCL are both authorized to check my credit and employment history and to answer questions about your credit experience with me. I authorize all past or present creditors to release any and all necessary credit information. I understand and agree that this document may be transmitted to creditors electronically by fax or other means. I hereby authorize those creditors to release information as detailed above based on this electronically transmitted document. To the extent that any leases are made by FCL in response to this application, FCL may sell to one or more other lessors, banks, or financial institutions a participation in one or more of any such leases. In connection with the foregoing, FCL may disclose information concerning the applicant and its subsidiaries to any participant or prospective participant, provided that such participant or prospective participant agrees to keep such information confidential. I hereby authorizes FCL at any time to file any UCC financing statement and/or fixture filing, showing the me as Debtor, as FCL may require in connection with any item of equipment described in this or any future application, all without my authentication to the extent permitted by applicable law.

_____ <i>Signature</i>	_____ <i>Date</i>	_____ <i>Signature</i>	_____ <i>Date</i>
_____ <i>(please print or type individual's name)</i>	_____ <i>(Title-corporations only)</i>	_____ <i>(please print or type individual's name)</i>	_____ <i>(Title-corporations only)</i>

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

SECTION A					<input type="checkbox"/> Application on file – 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 <input type="checkbox"/>	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)				

SECTION 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).

PRINCIPAL INFORMATION						
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				

YES
 NO

+Provide legible copy of each principal(s) or guarantor(s) driver's license

SECTION C

Financials on File (Less Than One Year Old)

Balance Sheet Attached

Fiscal Year End Date:

Income Information Attached

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 \$

Total Annual Net Non-Farm Income \$

SECTION D

Comments