Vermont Agricultural Credit Corporation - Loan Application

Last Updated -08/01/14

	Business Name:				ral ID# _		
Telephone #:	Cell #:	F	ax #	email address			
Complete Address:	Pouta#	DO Roy	City	State	Zip Co	do To	wn/County
Form of Ownership: LLC			•		-		wii/County
Applicant Information:	. L Sole Propriet	orsnipi Partilei	isiiip 🗀 Corporau	on 🗀 Co	operative		
••							
Name:Firs			Middle		 Last		
Social Security #:							
Telephone #:	Cell #:	F	ax #	ema	il address	S	
Complete Address:							
	Route #	P.O. Box	City		State	Zip Code	Town/County
Name:First	st		Middle		Last		
Social Security #:				Date of	of Birth: _		
Social Security #: Telephone #:							
Telephone #:	Cell #:	F	ax #	ema			
	Cell #:	F	ax #	ema	il address	3	
Telephone #:	Cell #: Route #	P.O. Bo	ax #x City	ema	il address State	Zip Code	Town/Count
Telephone #: Complete Address:	Route #	P.O. Bo	x City Applicant/Co A	ema	il address State	Zip Code	Town/Count
Telephone #: Complete Address: Additional Co-Applicant	Route #	P.O. Bo	x City Applicant/Co Ap Middle	ema	State Last	Zip Code	Town/Count
Telephone #: Complete Address: Additional Co-Applicant Name: First	Route #	P.O. Bo	x City Applicant/Co Ap Middle	pplicant _	State Last of Birth: _	Zip Code	Town/Count
Telephone #: Complete Address: Additional Co-Applicant Name: First Social Security #:	Route # t's Information –	P.O. Bo Relationship to	x City Applicant/Co Ap Middle	pplicant _ Date c	State Last of Birth: _	Zip Code	Town/Count
Telephone #: Complete Address: Additional Co-Applicant Name: First Social Security #: Telephone #:	Route # t's Information –	P.O. Bo Relationship to	x City Applicant/Co Ap Middle	pplicant _ Date c	State Last of Birth: _	Zip Code	Town/Count
Telephone #: Complete Address: Additional Co-Applicant Name: First Social Security #: Telephone #: Complete Address:	Route # t's Information – St Cell #: Route #	P.O. Bo Relationship to	x City Applicant/Co Ap Middle	pplicant _ Date c	State Last of Birth: _	Zip Code	Town/Count
Telephone #: Complete Address: Additional Co-Applicant Name: First Social Security #: Telephone #: Complete Address: Are you farming now? Y	Route # St Cell #: Route # Cell #: Route # Yes □ No □	P.O. Bo Relationship to F	x City Applicant/Co Ap Middle ax #	pplicant _ Date o	State Last of Birth: _ il address State	Zip Code Zip Code	Town/County
Telephone #: Complete Address: Additional Co-Applicant Name: First Social Security #: Telephone #:	Route # St Cell #: Route # Cell #: Route # Yes □ No □	P.O. Bo Relationship to F	x City Applicant/Co Ap Middle ax #	pplicant _ Date o	State Last of Birth: _ il address State	Zip Code Zip Code	Town/County
Telephone #: Complete Address: Additional Co-Applicant Name: First Social Security #: Telephone #: Complete Address: Are you farming now? You be completed to the complete of	Route # St Cell #: Route # Cell #: Route # Yes □ No □	P.O. Bo Relationship to F P.O. Box or:	x City Applicant/Co Ap Middle ax # City	pplicant _ Date c	State Last of Birth: _ il address State	Zip Code Zip Code	Town/County

** PLEASE SUBMIT A COPY OF YOUR MOST RECENT FEDERAL TAX RETURN.

MAIL YOUR COMPLETED APPPLICATION TO:

Vermont Agricultural Credit Corporation 58 East State Street, Suite 5 Montpelier, VT 05602-3044

9. If you own your farm How? Inherited / Puro	n: Date acquired:		Acc	quired from:			
10. Have you, the entity,		f the entity eve	er been in rec	eivership, b	een disc	harged in bankruptcy	, or filed a petition for
	-	-		_			r
bankrupicy? Yes L	□ No □ (11 yes,]	provide details	5)				
11. If you rent your far		wner name:					
Please describe h	nistory of rental a	rrangement an	d attach a co	py of the rer	ntal agree	ement.	
							_ _
12. List the terms of all				Ţ			_
	Number of	Acres	Is the lease writte		For	how many years	Annual Cost
Parcel 1							\$
Parcel 2							\$
Parcel 3							\$
Parcel 5							\$
13. Describe your off fa	rm emnlovment:						
10. Describe your on in	Name/Address			Number of	f Years	Kind of Work	Income Last Year
Applicant:							
Co-Applicant:							
14. What is the size loan	VALLAPA PAGUAS	ting?	\$	Dose	eriba ba	ow how the funds w	rill be used:
Refinancin	g Existing Debt	ung.	_ Ψ]	Desc	cribe be	low now the funds w	m be useu.
Lender	Purpo	ose	Current	Principal Ba	alance	Interest Rate	Monthly Payment
						%	
						%	
						%	
						%	
						%	
	Total Debt to b	e Refinanced	\$				
New Purchas	ses	Vendo	r/Supplier		P	'urpose	Cost
							\$
							\$
							\$
							\$
Total New Purchases						\$	
				TOTA	L VAC	C LOAN REQUEST	\$
15. Describe the efforts	you have made t	to finance the	se needs.				
16. Describe the collater	ral you intend to	use as securi	ty for the lo	an.			
17. Employment Inform	nation Including	Farm Owner	/Operators	and Familv	Membe	rs:	
	- 8			•			
Full Time: Seasonal:							
Part Time:							

PLEASE NOTE: Your application will not be considered complete unless signed.

Release of Credit Information Statement

I or We hereby authorize you to release to the Vermont Agricultural Credit Corporation any and all information regarding my credit status, payoff balances and/or copies of credit and financial information. I authorize VACC to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in any documents submitted to VACC are true and accurate as of the stated date(s). These statements are made for the purpose of obtaining a loan and/or a loan guarantee.

Signature of Applicant:	Date:
Signature of Spouse/Co-Applicant:	Date:
Signature of Co-Applicant:	Date:

Vermont Agricultural Credit Corporation

Date Submitted _____ APPLICANT:_____ CO-APPLICANT:____ **CREDIT REFERENCES** (for everyone whom you owe \$1,000 or more) 1. Creditor______ Account # _____ Town: ______ State: _____ Zip: _____ 2. Creditor_____ Account # _____ Town: ______ State: _____ Zip: _____ 3. Creditor______ Account # _____ Town: State: Zip: 4. Creditor______ Account # _____ Address: Town: ______ State: _____ Zip: _____ 5. Creditor______ Account # _____ Town: ______ State: _____ Zip: _____ 6. Creditor_____ Account # _____ Town: ______ State: _____ Zip: _____ 7. Creditor______ Account # _____

Town: ______ State: _____ Zip: _____

8. Creditor	Account #					
Address:						
Town:						
9. Creditor	Account #					
Address:						
Town:	State:	Zip:				
10. Creditor	Account #					
Address:						
Town:	State:	Zip:				
11. Creditor	Account #					
Address:						
Town:	State:	Zip:				
12. Creditor	Account #					
Address:						
Town:	State:	Zip:				
13. Creditor	Account #					
Address:						
Town:	State:	Zip:				
14. Creditor	Account #					
Address:						
Town:						
15. Creditor	Account #					
Address:						
Town:		Zip:				

VACC - FINANCIAL STATEMENT – DATE _____

NAME:				MILK C	OMPANY			PATRON #	
	Total Acre	es:	Owned	Rented	Crop Acres]	Rented	
BALANCE SHE	ET							Curren	t Balance
CURRENT FAR	M ASSETS	S		\$ VALUE	CURRENT FARM LIA	ABILIT	TIES		
Cash: Savings: (\$)(Checking	(\$)		Accounts & Notes Payable (Cred	litor & Du	e Date)	Past Due	
Other Invest: (Time 0	Cert \$) (Other \$						
Accounts & Notes R	eceivable								
Crops and Feed	Units	Value	Per Unit						
	-								
Livestock to be sold	Units	Unit Weight	Value Per Unit						
		Weight			CCC Loan: (Security) (Due Date)	
					Current Portion of Principal	Due on:			
					Intermediate Liabilities				
					Long Term Liabilities				
Growing Crops	F	Acres	Cost/Acre		Accrued Interest on:				
					Accounts and Notes Payal	ble			
					Intermediate Liabilities				
					Long Term Liabilities				
					Accrued Taxes				
Supplies and Prepaid Expenses				Income Tax and Social Secu					
Leases				Other (judgments, liens, etc.					
Other				Accrued Rent/Lease Paymen	its				
TOTAL CURRENT FARM ASSETS				ТОТ	AL CU	RREN	Γ FARM LIABILITIES		
INTERMEDIATE FA	ARM ASSETS	5			INTERMEDIATE FARM L	[ABILIT]	IES (por	tion due beyond 12 months)	
Accounts & Notes Receivable beyond 12 months				Creditor	Due Date	Int. Rate	Monthly Payment		
Breeding Livestock		Units	Value Per Unit			Date	Kate		
<u> </u>									
Machinery, Equipme	ent, Vehicles								
Cash Value, Life Ins. (Face Amount. \$				CCC Grain Reserve					
CCC Grain Reserve:	(Qty.) (Value	e/Unit)		Facilities				
Coop Stock				Loan Secured by Life Insura					
Other				Other					
TOTAL INTERMEDIATE FARM ASSETS				TOTAL IN					
LONG TERM FARM	ASSETS (Fa	arm Real	Estate)		LONG TERM FARM LIABILITIES (Portions due beyond 12 months)				
Total Acres	Date Purc	hased	Cost		Creditor	Due Date	Int. Rate	Monthly Payment	
						Date	Kate		
Coop Stock	ı	<u> </u>							
Equity in Partnerships/C	orporations/Join	t Operation	as/Cooperatives						
Other					Other	1		ı	
TOTAL LONG TERM FARM ASSETS				TOTAL LONG TERM FARM LIABILITIES					
TOTAL FARM ASSETS				-	ГОТАІ	L FARM LIABILITIES			

NONFARM ASSETS	\$VALUE	NONFARM LIAB				
Real Estate		Nonfarm accounts				
Car, Recreational Vehicles, etc.						
Household goods						
Cash value of Life Insurance						
Stocks, bonds, and other						
Cash: Savings: (\$) Checking (\$)		Nonfarm notes pay	able:			
Nonfarm Business		Name of Creditor	Due Date	Int. Rate	Monthly Payment	
		TOTAL NO)NF	ARM	I LIABILITIES	
		TOTAL LIABILITIES				
TOTAL NONFARM ASSETS				T	OTAL ASSETS	
TOTAL ASSETS		NET WORTH				
I or We hereby authorize you to release to the		•	-		•	

I or We hereby authorize you to release to the Vermont Agricultural Credit Corporation any and all information regarding my credit status, payoff balances and/or copies of credit and financial information. I authorize VACC to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in any documents submitted to VACC are true and accurate as of the stated date(s). These statements are made for the purpose of obtaining a loan and/or a loan guarantee.

Signature of Borrower:	 Date:
Signature of Spouse/Co-Borrower: _	 Date:

M,VACC Fin Stm