

Vermont Agricultural Credit Corporation Vermont Small Business Loan Program Vermont 504 Corporation

Dear VACC loan applicant,

Thank you for choosing VACC for your financing needs. Please complete the following checklist and attached worksheets as you prepare your application for submission. Submitting a complete application will help speed the loan review process and result in a decision on your loan sooner. Once we receive your completed loan application package a loan officer will be in touch to discuss your request and to schedule a time to meet with you, preferably at your place of business.

| Ch  | ecklist:   |
|-----|--|
|     | Completed Loan Application form with Release of Credit Information Statement to be signed by all applicants.     |
|     | List of Creditors – name, address and account number for everyone whom you owe \$1,000 or more on                |
|     | worksheet.   |
|     | Current Financial Statement (Balance Sheet) – all business and personal assets and liabilities on enclosed       |
|     | worksheet or other format such as QuickBooks, Excel, etc.  |
|     | Complete copies of most recent 3 years of Federal Income Tax Returns, both business and personal, for loan       |
|     | requests > \$125,000 and 1 year for loan requests < \$125,000.   |
|     | Business Plan for new or expanding businesses. Projected typical year income and expenses for existing           |
|     | businesses. Additional information may be requested.   |
|     | Year to Date Income and Expenses (current year) for existing businesses.   |
| Fo  | r Collateral Purposes:   |
|     | Chattel – provide detail on livestock, equipment and/or vehicles being offered as collateral in sections 3A, 3B, |
|     | and K of the Financial Statement (Balance Sheet) worksheet enclosed.   |
|     | Real estate description, town tax assessment, etc. may be requested later.                                       |
| Fo  | r Business Entities (Partnership, LLC, S-Corp. or C-Corp):   |
|     | Copy of Partnership Agreement.   |
|     | Copy of Articles of Organization or Incorporation.   |
|     | Copy of Operating Agreement or By-Laws.  |
|     | Copy of lease(s).  |
| Ify | you have any questions, please contact Ann Miller at (802) 828-0626 or amiller@veda.org                          |
| Ma  | il your completed application package to:  |

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

**VEDA:** TEL (802) 828-5627 • **VACC:** (866) 828-3276 FAX (802) 828-5474 • 58 EAST STATE STREET, SUITE 5, MONTPELIER, VERMONT 05602-3044

## Vermont Agricultural Credit Corporation - Loan Application - FOLP 2018 Last Updated - July 2018

| Business Name:             |                      |                   |                    | Federal ID#           |           |              |
|----------------------------|----------------------|-------------------|--------------------|-----------------------|-----------|--------------|
| Telephone #:               | Cell #:              | Fax               | #                  | email addre           | SS        |              |
| Complete Address:          | D                    | DO D              | C'A                | Ct + 7' C             | 1 T       | /0           |
|                            | Route #              | P.O. Box          | City               | State Zip C           | ode low   | n/County     |
| Form of Ownership: LLC     | Sole Proprieto       | orship Partnersh  | ip   Corporat      | tion   Cooperativ     | /e 🗆      |              |
| Applicant Information:     |                      |                   |                    |                       |           |              |
| Name:Firs                  |                      |                   |                    |                       |           |              |
| Firs Social Security #:    | t                    |                   | Middle             |                       |           |              |
| Telephone #:               |                      |                   |                    |                       |           |              |
|                            |                      |                   |                    |                       |           |              |
| Complete Address:          | Route #              | P.O. Box          | City               | State                 | Zip Code  | Town/County  |
|                            |                      | . —               | _                  |                       |           |              |
| Co-Applicant's Informat    | ion (Spouse of Ap    | oplicant – Yes 🗆  | No □):             |                       |           |              |
| Name:                      |                      |                   |                    |                       |           |              |
| Name: Firs                 |                      |                   |                    |                       |           |              |
| Social Security #:         |                      |                   |                    | Date of Birth:        |           |              |
| Telephone #:               | Cell #:              | Fax               | #                  | email addre           | SS        |              |
| Complete Address:          | Dayta #              | D.O. Day          | City               | Ctata                 | 7in Codo  | Town/County  |
|                            | Route #              | 1.O. Box          | City               | State                 | Zip Code  | Town/County  |
| Additional Co-Applicant    | 's Information –     | Relationship to A | .pplicant/Co A     | pplicant              |           | <b>:</b>     |
| Name:                      |                      |                   |                    |                       |           |              |
| Name: Firs                 | t                    |                   | Middle             | Last                  |           |              |
| Social Security #:         |                      |                   |                    |                       |           |              |
| -                          | Cell #:              | Fax               | #                  | email addre           | SS        |              |
| Complete Address:          | Route #              | P.O. Box          | City               | State                 | Zip Code  | Town/County  |
|                            |                      | 1.0.00            | City               | State                 | Zip Couc  | 10wii/County |
| Are you farming now? Y     | es □ No □            |                   |                    |                       |           |              |
|                            | as a farm operato    | or and provide a  | description and    | d history of your     | business: |              |
| Describe vour experience : | us u iui iii opei ue | r unu provinciu   | zeser iperon un    | a 1115001 y 01 y 0 a1 |           |              |
| Describe your experience   |                      |                   |                    |                       |           |              |
| Describe your experience   |                      |                   |                    |                       |           |              |
| Describe your experience   |                      |                   |                    |                       |           |              |
| Describe your experience   |                      |                   |                    |                       |           |              |
| Describe your experience   |                      |                   |                    |                       |           |              |
| Describe your experience   |                      |                   |                    |                       |           |              |
| Describe your experience : | ed as a partnersh    | ip or corporation | ı, please list all | I the Partners or     | Directors |              |

| 9. <b>If you own your farm</b> How? Inherited / Purc  | <b>:</b> Date acquired: _<br>chased |                 | Acq                            | uired from:   |           |                      |                         |  |  |  |  |
|---|-------------------------------------|-----------------|--------------------------------|---------------|-----------|----------------------|-------------------------|--|--|--|--|
| <b>10.</b> Have you, the entity,  | or any member of                    | the entity ever | been in rec                    | eivership, be | een disch | arged in bankruptcy, | or filed a petition for |  |  |  |  |
|   | -                                   | -               |                                | _             |           |                      | _                       |  |  |  |  |
|   |                                     |                 |                                |               |           |                      |                         |  |  |  |  |
| 11. If you rent your farm: Landowner name: Please describe history of rental arrangement and attach a copy of the rental agreement. |                                     |                 |                                |               |           |                      |                         |  |  |  |  |
|   |                                     |                 |                                |               |           |                      |                         |  |  |  |  |
|   |                                     |                 |                                |               |           |                      |                         |  |  |  |  |
| 12. List the terms of all   | Number of                           |                 | Is the lease                   | oral or       | For       | how many years       | Annual Cost             |  |  |  |  |
| D 11  |                                     |                 | writte                         |               |           |                      |                         |  |  |  |  |
| Parcel 1  |                                     |                 |                                |               |           |                      | \$                      |  |  |  |  |
| Parcel 2  |                                     |                 |                                |               |           |                      | \$                      |  |  |  |  |
| Parcel 3  |                                     |                 |                                |               |           |                      | \$                      |  |  |  |  |
| 13. Describe your off- fa   | rm employment:                      |                 |                                |               |           |                      |                         |  |  |  |  |
| 13. Describe your on- ia  | Name/Address                        | of Employer     |                                | Number o      | f Years   | Kind of Work         | Income Last Year        |  |  |  |  |
| Applicant:  |                                     |                 |                                |               |           |                      |                         |  |  |  |  |
| Co-Applicant:   |                                     |                 |                                |               |           |                      |                         |  |  |  |  |
|   |                                     |                 |                                | <u> </u>      |           |                      |                         |  |  |  |  |
| Estimate of annual famil  | y living expense:                   |                 |                                |               |           |                      |                         |  |  |  |  |
| 14. What is the size loan   | you are requesti                    | ng?             | \$                             | Desci         | ribe belo | w how the funds wil  | l be used:              |  |  |  |  |
| Refinancii  | ng Existing Debt                    |                 |                                |               |           | T                    | T                       |  |  |  |  |
| Lender  | Purpo                               | ose             | Current Principal Balance Inte |               |           | Interest Rate %      | Monthly Payment         |  |  |  |  |
|   |                                     |                 |                                |               |           | %                    |                         |  |  |  |  |
|   |                                     |                 |                                |               |           | %                    |                         |  |  |  |  |
|   |                                     |                 |                                |               |           | %                    |                         |  |  |  |  |
|   |                                     |                 |                                |               |           | %                    |                         |  |  |  |  |
|   | T-4-1 D-144- 1                      | - D - C 1       | ¢                              |               |           | 70                   |                         |  |  |  |  |
|   | Total Debt to be                    | e Kelinanced    | \$                             |               |           |                      |                         |  |  |  |  |
| New Purcha  | ases                                | Vendo           | r/Supplier                     |               | F         | Purpose              | Cost                    |  |  |  |  |
|   |                                     |                 |                                |               |           | •                    | \$                      |  |  |  |  |
|   |                                     |                 |                                |               |           |                      | \$                      |  |  |  |  |
|   |                                     |                 |                                |               |           |                      | \$                      |  |  |  |  |
|   |                                     |                 |                                |               |           |                      | \$                      |  |  |  |  |
|   |                                     |                 |                                |               | 7         | Total New Purchases  | \$                      |  |  |  |  |
|   |                                     |                 |                                | TOTA          | L VAC     | C LOAN REQUEST       | \$                      |  |  |  |  |
| 15. Describe the efforts  | vou have made to                    | finance these   | e needs.                       |               |           |                      |                         |  |  |  |  |
|   |                                     |                 |                                |               |           |                      |                         |  |  |  |  |
| 16. Describe the collater   | al vou intend to u                  | ise as security | y for the loa                  | n.            |           |                      |                         |  |  |  |  |
|   | <i>J</i>                            |                 | ,                              | -             |           |                      |                         |  |  |  |  |
| 17. Employment Inform   | ation Including F                   | arm Owner/      | Operators a                    | nd Family     | Member    | ·s                   |                         |  |  |  |  |
| Full Time:  | #                                   | Part            | Time:                          | #             |           | Seasonal:            | #                       |  |  |  |  |
|   |                                     |                 |                                |               |           |                      |                         |  |  |  |  |

## Release of Credit Information Statement

I hereby authorize you to release to the Vermont Agricultural Credit Corporation (VACC) any and all information regarding my credit status, payoff balances, milk assignment payees and amounts, and/or copies of credit and financial information.

VACC, and its agents or assignees, are authorized to share such information with, and receive such information from, other creditors and lenders, including but not limited to the USDA Farm Service Agency, as well as federal, state and local farm program payors and conservation organizations, upon request, without notice to me.

I authorize VACC to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify that the statements contained in any documents that I prepared are true and accurate as of the stated date(s). These statements are made for the purpose of obtaining and/or servicing a loan and/or a loan guarantee.

**Public Disclosure:** Vermont Economic Development Authority (VEDA), of which VACC is an affiliated organization, is an instrumentality of the State of Vermont and is subject to Vermont's Public Records Law (see Vermont Statutes, Title I, Chapter 5 §§ 315-320). All written or electronic information generated or received by VEDA is subject to the confidentiality and public disclosure provisions of the Vermont Public Records Law. Under the law, business plans and financial information submitted by applicants are generally considered confidential and are not subject to disclosure.

The original or copies (including electronically scanned copies) of this signed form will provide continuing authorization unless cancelled in writing.

| Signature of Applicant:           | Date: |  |
|-----------------------------------|-------|--|
| Print name:                       |       |  |
| Signature of Spouse/Co-Applicant: | Date: |  |
| Print name:                       |       |  |

## **Vermont Agricultural Credit Corporation**

| Date Submitted |                                   |                 |      |
|----------------|-----------------------------------|-----------------|------|
| APPLICANT:     | CO-APPLICANT:                     |                 |      |
| CREDIT         | ORS (list everyone to whom you ow | ve \$1,000 or m | ore) |
| 1. Creditor    | A                                 | Account #       |      |
| Address:       |                                   |                 |      |
|                |                                   |                 |      |
| 2. Creditor    | A                                 | Account #       |      |
| Address:       |                                   |                 |      |
|                |                                   |                 |      |
| 3. Creditor    | A                                 | Account #       |      |
| Address:       |                                   |                 |      |
| Town:          |                                   | _ State:        | Zip: |
| 4. Creditor    | A                                 | Account #       |      |
| Address:       |                                   |                 |      |
|                |                                   |                 |      |
| 5. Creditor    | A                                 | Account #       |      |
| Address:       |                                   |                 |      |
|                |                                   | _ State:        | Zip: |
| 6. Creditor    | £                                 | Account #       |      |
| Address:       |                                   |                 |      |
|                |                                   |                 |      |
| 7. Creditor    | <i>F</i>                          | Account #       |      |
|                |                                   |                 |      |
|                |                                   |                 |      |

| Е                                 | eet            |                | A. Name           |            |   |                            | B. Tax ID Number     |                       |                               |                          |
|-----------------------------------|----------------|----------------|-------------------|------------|---|----------------------------|----------------------|-----------------------|-------------------------------|--------------------------|
| E Date/M                          | IM DD VOOO     |                |                   |            | C. Address (Include City, State/Prov, Zip/PC)  D. Contact Phone No. |                            |                      |                       | Including area code)          |                          |
| A - CURRENT ASSET                 | IM-DD-YYYY)_   |                |                   | _          | В   | - CURREN                   | NT LIABILITI         | FS                    |                               |                          |
| 1A. Cash and Equivalents          |                |                |                   | \$ Value   |   | . Accounts I               | \$ Amount            |                       |                               |                          |
|                                   |                |                |                   |            |   |                            |                      |                       |                               |                          |
|                                   |                |                |                   |            |   |                            |                      |                       |                               |                          |
| 1B. Marketable Bonds an           | d Securities   |                |                   |            |   |                            |                      |                       |                               |                          |
|                                   |                |                |                   |            |   |                            |                      |                       |                               |                          |
| 1C. Accounts Receivable           |                |                |                   |            | 2B  | . Income Ta                | axes Payable         |                       |                               |                          |
|                                   |                |                |                   |            |   |                            |                      |                       |                               |                          |
|                                   | ı              | 1              |                   |            | 2C  | . Real Estat               | te Taxes Payat       | ole                   |                               |                          |
| 1D. Crop Inventory                | 1E.<br>Measure | 1F.<br># Units | 1G.<br>\$/Unit    | \$ Value   |   |                            |                      |                       |                               |                          |
|                                   |                |                |                   |            | 20  | . Creditor                 | Notes                | Payable Due           | Within 12 Months  2E. Purpose |                          |
|                                   |                |                |                   |            | 20  | 2F. Interest               | 2G. Accrued Interest | 2H. Payment<br>Amount | 2I. Next Payment Date         | 2J. Principal<br>Balance |
|                                   |                |                |                   |            | (1)   |                            | intorost             | ranount               | Date                          | Bularioc                 |
| 1H. Growing Crops                 |                | 1I. # Acres    | 1J. Cost/<br>Acre | \$ Value   |   |                            |                      |                       |                               |                          |
|                                   |                |                |                   |            | (2)   |                            | 1                    | <u> </u>              |                               |                          |
|                                   |                |                |                   |            | (2)   |                            |                      |                       |                               |                          |
|                                   |                |                |                   |            | (3)   |                            |                      |                       |                               |                          |
| 1K. Market Livestock -<br>Poultry | 1L.<br># Head  | 1M.<br>Weight  | 1N.<br>\$/Unit    | \$ Value   | (4)   |                            |                      |                       |                               |                          |
| ·,                                |                |                |                   |            |   |                            |                      |                       |                               |                          |
|                                   |                |                |                   |            | 2K  | . Accrued Ir               | nterest On:          |                       |                               | \$ Amount                |
|                                   |                |                |                   |            | (1) Current Liabilities   |                            |                      |                       |                               |                          |
|                                   |                |                |                   |            |   | (2) Intermed<br>(3) Long T |                      |                       |                               |                          |
| 10. Livestock Products            | 1P.<br>Measure | 1Q.<br># Units | 1R.<br>\$/Unit    | \$ Value   | 2L  |                            | ortion of Princip    | al Due On:            |                               |                          |
|                                   | modelic        | " out          | φ/σ               |            |   | (1) Interme                | ediate Liabilitie    | s                     |                               |                          |
|                                   |                |                |                   | (2) Long T |   |                            |                      |                       |                               |                          |
| 1S. Prepaid Expenses ar           | nd Supplies    |                |                   |            | 2M. Other Current Liabilities                                       |                            |                      |                       |                               |                          |
|                                   |                |                |                   |            |   |                            |                      |                       |                               |                          |
| 1T. Other Current Assets          |                |                |                   |            |   |                            |                      |                       |                               |                          |
|                                   |                |                |                   |            |   |                            |                      |                       |                               |                          |
| 1U. TOTAL CURRENT A               | SSETS (Iten    | ns 1A throug   | h 1T)             |            | 2N  | . TOTAL CI                 | URRENT LIAB          | ILITIES (Items        | 2A through 2M)                |                          |

| C - INTERMEDIA          |                    |                   |               | E - INTERMEDIATE LIABILITIES |          |   |                      |                         |                       |                                       |                          |
|-------------------------|--------------------|-------------------|---------------|------------------------------|----------|---|----------------------|-------------------------|-----------------------|---------------------------------------|--------------------------|
| 3A. Machinery & Ed      | quipment / F       | arm Vehi          | cles (Entere  | ed On Page 4                 | 1)       | 5A  | . Creditor           |                         |                       | 5B. Purpose                           |                          |
| 3B.<br>Breeding Stock   | Rais               | 3C.<br>ed/Purch   | 3D.<br># Head | 3E.<br>\$/Head               | \$ Value |   | 5C. Interest<br>Rate | 5D. Accrued<br>Interest | 5E. Payment<br>Amount | 5F. Next Payment<br>Date (MM-DD-YYYY) | 5G. Principal<br>Balance |
|                         |                    |                   |               |                              |          | (1)   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          | (2)   | •                    | 1                       |                       |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          | (3)   |                      | II.                     | 1                     |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
| 3F. Notes Receivable    | I                  | L                 |               |                              |          | (4)   |                      | I                       | 1                     |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          | (5)   |                      | <u> </u>                |                       |                                       |                          |
| 3G. Not Readily Marke   | table Bonds        | and Securit       | es            |                              |          |   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          | (6)   |                      | I                       |                       |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
| 3H. Other Intermediate  | Assets             |                   |               |                              |          | (7)   | _                    | <u> </u>                |                       |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
| 3I. TOTAL INTERMED      | DIATE ASSET        | ΓS (Items 3       | A through 3H  | l)                           |          | 5H  | . TOTAL INT          | ERMEDIATE LIA           | BILITIES (Item 5      | G (1 through 7))                      |                          |
| D- LONG TERM            | ASSETS             |                   |               |                              |          | F-  | LONG TE              | RM LIABILIT             | TIES                  |                                       |                          |
| 4A. Building and Im     | provement          | S                 |               |                              | \$ Value | 6A. Creditor 6B. Purpose                      |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          | 6   | 6C. Interest<br>Rate | 6D. Accrued<br>Interest | 6E. Payment<br>Amount | 6F. Next Payment<br>Date              | 6G. Principal<br>Balance |
|                         |                    |                   |               |                              |          | (1)   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          | (2)   |                      | l                       |                       |                                       |                          |
| 4B.<br>Real Estate-Land | 4C. Total<br>Acres | 4D. Crop<br>Acres | 4E.<br>%Owned | 4F. \$/Acre                  |          |   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          | (3)   |                      | l                       |                       |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          | (4)   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          | (5)   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          | (6)   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
| 4G. Other Long Ter      | m Assets           | I                 |               | l .                          | \$ Value | (7)   |                      |                         |                       |                                       | <u> </u>                 |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
|                         |                    |                   |               |                              |          |   |                      |                         |                       |                                       |                          |
| 4H. TOTAL LONG          | TERM AS            | SETS (Ite         | ms 4A thro    | ugh 4G)                      |          | 6H.   | TOTAL LO             | ONG TERM LIA            | ABILITIES (Iter       | m 6GA (1 through 7))                  |                          |
| 4I. TOTAL FARM          |                    |                   |               |                              |          |   |                      |                         |                       | s 2N, 5H, and 6H)                     |                          |
|                         |                    |                   |               |                              |          | 6J. TOTAL FARM EQUITY (Item 4I minus Item 6I) |                      |                         |                       |                                       |                          |

| G - PERSONAL ASSETS   |   | Н                              | - PERSON             | AL LIABILIT             | TIES                  |                          |                          |  |
|---|---|--------------------------------|----------------------|-------------------------|-----------------------|--------------------------|--------------------------|--|
|   | \$ Value  | 8A                             | . Creditor           |                         |                       | 8B. Purpose              |                          |  |
| 7A. Cash and Equivalents  |   |                                | 8C. Interest<br>Rate | 8D. Accrued<br>Interest | 8E. Payment<br>Amount | 8F. Next Payment<br>Date | 8G. Principal<br>Balance |  |
| 7B. Stocks, Bonds   |   | (1)                            |                      |                         |                       |                          |                          |  |
| 7C. Cash Value Life Insurance   |   |                                |                      |                         |                       |                          |                          |  |
| 7D. Other Current Assets  |   | (2)                            |                      |                         |                       |                          |                          |  |
| 7E. Household Goods   |   |                                |                      |                         |                       |                          |                          |  |
| 7F. Car, Recreational Vehicle, Etc.   |   | (3)                            |                      |                         |                       |                          |                          |  |
| 7G. Other Intermediate Assets   |   |                                |                      |                         |                       |                          |                          |  |
| 7H. Retirement Accounts   |   | (4)                            |                      |                         |                       |                          |                          |  |
| 7I. NonFarm Business  |   |                                |                      |                         |                       |                          |                          |  |
| 7J. NonFarm Real Estate   |   | 8H                             | . Other Liab         | ilities                 |                       |                          |                          |  |
| 7K. Other Long Term Assets  |   |                                |                      |                         |                       |                          |                          |  |
| 7L. TOTAL PERSONAL ASSETS (Items 7A through 7K)   |   | 8I. TOTAL PERSONAL LIABILITIES |                      |                         |                       |                          |                          |  |
| 7M. TOTAL ASSETS (Item 4I and Item 7L)  |   | 8J.                            | TOTAL LIA            |                         |                       |                          |                          |  |
|   |   | 8K                             | . TOTAL EC           | QUITY (Item 7           | M minus Item          | 8J)                      |                          |  |
| I - WARNING   |   |                                |                      |                         |                       |                          |                          |  |
| 9A. SIGNATURE   |   |                                |                      |                         |                       | 9B. DATE                 |                          |  |
|   |   |                                |                      |                         |                       |                          |                          |  |
| credit status, payoff balances and/or copies of cred<br>to verify the accuracy of the statements made and | 10. I/We hereby authorize you to release to the Vermont Agricultural Credit Corporation (VACC) any and all information regarding my credit status, payoff balances and/or copies of credit and financial information. I/We authorize VACC to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I/We certify the above and the statements contained in any documents submitted to VAC 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:  |   |                                |                      |                         | Date:                 |                          |                          |  |
| Signature:  |   |                                |                      |                         |                       |                          |                          |  |
| oignature.  |   |                                |                      |                         |                       |                          |                          |  |
| Signature:  |   |                                |                      |                         | Date:                 |                          |                          |  |
| Signature:  |   |                                |                      |                         | Date:                 |                          |                          |  |

| J - MAC      | - MACHINERY AND EQUIPMENT |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|--------------|---------------------------|----------------------|-------------------|--------------------|--------------|-----------------------------|------------------|--|--|--|--|--|--|
| 11A.<br>Qty. | 11B.<br>Description       | 11C.<br>Manufacturer | 11D.<br>Size/Type | 11E.<br>Condition  | 11F.<br>Year | 11G.<br>Serial Number       | 11H.<br>\$ Value |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    | 11I TC       | TAL \$ VALUE OF (ITEM 11H)  |                  |  |  |  |  |  |  |
| K - FAF      | RM VEHICLES               |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
| 12A.<br>Qty. | 12B.<br>Description       | 12C.<br>Manufacturer | 12D.<br>Size/Type | 12E.<br>Condition  | 12F.<br>Year | 12G.<br>Serial Number/VIN   | 12H.<br>\$ Value |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              | 2I. TOTAL \$ VALUE OF (12H) |                  |  |  |  |  |  |  |
|              |                           |                      | 12J. TO           | TAL \$ VALUE OF (I | TEMS 11I AND | 12I) TRANSFER TO ITEM 3A)   |                  |  |  |  |  |  |  |
|              |                           |                      |                   |                    |              |                             |                  |  |  |  |  |  |  |