

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 \leq \$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).
If y	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

Last Updated - October 2018

Business Name:				Federa	ıl ID#			
Telephone #:	Cell #:	Fa	x #	email	addre	ss		
Complete Address:								
	Route #	P.O. Box	City	State	Zip C	Code	Town	/County
Form of Ownership: LLC	C Sole Propriet	orship Partner	ship 🗆 Corporat	tion Coop	perativ	⁄е □		
Applicant Information:								
Name:								
First Social Security #:	st		Middle		ast Birth:			
Telephone #:	Cell #:	Fa	x #	email	addre	SS		
Complete Address:								
		$\mathbf{p} \circ \mathbf{p}$	O:4	C.	tate	Zip Cod	1 _	Town/County
Co-Applicant's Informat	· -	pplicant – Yes [Zip Coc	ie	Town/County
	tion (Spouse of A	pplicant – Yes [□ No □):	La	ast			Town/County
Name:Firs	tion (Spouse of A	pplicant – Yes [□ No □):	La Date of B	ast Birth: _			
Name:First Social Security #:	st Cell #:	pplicant – Yes [No □): Middle x #	La Date of E email	ast Birth: _	SS		
Name:Firs	tion (Spouse of A	pplicant – Yes [No □): Middle x #	La Date of E email	ast Birth: _	ss		
Name:First Social Security #: Telephone #: Complete Address:	ct Cell #:Route #	pplicant – Yes [No □): Middle x #	La Date of B email	ast Birth: _ addre	ss	le	Town/County
Name:First Social Security #: First Social Security #: Complete Address: Additional Co-Applicant Name:	ction (Spouse of A St Cell #: Route #	pplicant – Yes [Fa P.O. Box	No □): Middle x # City Applicant/Co A	La Date of B email	ast Birth: _ addre	ss	le	Town/County
Name:First Social Security #: Telephone #: Complete Address:	ction (Spouse of A St Cell #: Route # t's Information —	pplicant – Yes Fa P.O. Box Relationship to	No □): Middle x # City Applicant/Co A Middle	La Date of B email So applicant	ast Birth: _ addre	ss	le	Town/County
Name:First Social Security #: Telephone #: Complete Address: Additional Co-Applicant Name: First	ct Cell #: Route #	pplicant – Yes [Fa P.O. Box Relationship to	No □): Middle x # City Applicant/Co A Middle	La Date of B email So applicant	ast Birth: _ addre. tate ast Birth:	ssZip Cod	le	Town/County
Name:First Social Security #: Telephone #: Complete Address: Additional Co-Applicant Name: First Social Security #:	ction (Spouse of A St Cell #: Route # t's Information —	pplicant – Yes Fa P.O. Box Relationship to	No □): Middle x # City Applicant/Co A Middle x #	La Date of B email Si pplicant La Date of email	ast Birth: _ addre tate ast Birth: addre	ss	le	Town/County
Name:First Social Security #: Telephone #: Complete Address: Additional Co-Applicant Name: First Social Security #: Telephone #:	ct Cell #: Route # t's Information —	pplicant – Yes [Fa P.O. Box Relationship to	No □): Middle x # City Applicant/Co A Middle	La Date of B email Si pplicant La Date of email	ast Birth: _ addre. tate ast Birth:	ssZip Cod	le	Town/County

8. If the operation is organized as a partnership or corporation, please list all the Partners or Directors or Officers.

9. If you own your farm How? Inherited / Purc	: Date acquired:hased	Acq	uired from: _			
	or any member of the entity eve	er been in rec	eivership, bee	n disch	arged in bankruptcy,	or filed a petition for
	No ☐ (if yes, provide details		•			•
11. If you rent your farm	n: Landowner name:					
•	rental arrangement and attach a					
10 12-44b 4						
12. List the terms of all l		s the lease ora	al or written?	For	how many years?	Annual Cost
Parcel 1						\$
Parcel 2						\$
Parcel 3						\$
13. Describe your off- fa			N 1 C	X7	77: 1 C337 1	T T . XZ
Annthone	Name/Address of Employer		Number of	Years	Kind of Work	Income Last Year
Applicant:						
Co-Applicant:						
Estimate of annual famil	y living expense:					
14. What is the size loan	you are requesting? \$			Descri	be below how the fu	nds will be used:
Refinancir	ng Existing Debt	\neg				
Lender	Purpose	Current	Principal Bal	ance	Interest Rate %	Monthly Payment
					%	
					%	
					%	
					%	
	Total Debt to be Refinanced	1 \$			70	
	10.001 2 000 10 00 110111.000					
New Purcha	ses Vend	or/Supplier		P	Purpose	Cost
						\$
						\$
						\$
					Table D. S.	\$
			TOTAL		Cotal New Purchases C LOAN REQUEST	\$
4.F. D. 11 .00 .	1 1 4 00 13	•				
15. Describe the efforts y	you have made to finance the	se needs.				
16 Decembe the colleter	al you intend to use as securi	tv fan tha laa	n			
10. Describe the conatera	ar you intend to use as securi	ty 101 the 10a	111•			
17. Employment Informa	ation Including Farm Owner	/Operators a	and Family M	Iember	·s	
	_	t Time:	#		Seasonal:	#
i dii Tillic.			"	_	Scasonar.	"

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: _______

rint 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 owe \$1,00	0 or more)
1. Creditor	Account	#
Address:		
Town:	State:	Zip:
2. Creditor	Account	#
Address:		
Town:	State:	Zip:
3. Creditor	Account	#
Address:		
Town:	State:	Zip:
4. Creditor	Account	#
Address:		
Town:	State:	Zip:
5. Creditor	Account	#
Address:		
Town:	State:	Zip:
6. Creditor	Account	#
Address:		
	State:	
7. Creditor	Account	#
Address:		
		Zip:

Е	eet		1.A	Name			B. Tax ID Number			
					C. Address (Include City, State/Prov, Zip/PC) D. Contact Phone No.				lo. (Including area code)	
E. Date(M	IM-DD-YYYY)_			_						
A CURRENT ASSET	TS				В	CURREN	NT LIABILITI	ES		
1A. Cash and Equivalent	S			\$ Value	2A	. Accounts I	\$ Amount			
1B. Marketable Bonds an	d Securities									
1C. Accounts Receivable	1				2B	. Income Ta	axes Payable			
	45	1F.	10		2C	. Real Estat	te Taxes Payat	ole		
1D. Crop Inventory	1E. Measure	# Units	1G. \$/Unit	\$ Value						
							Notes	Payable Due	Within 12 Months	
					2D	. Creditor 2F. Interest	2G. Accrued	2H. Payment	2E. Purpose 2l. Next Payment	2J. Principal
					(4)	Rate	Interest	Amount	Date	Balance
All Crowing Crops		41 # ^ 222	1J. Cost/	¢ \/ala	(1)					
1H. Growing Crops		1I. # Acres	Acre	\$ Value	(2)					
					(2)					
					(3)					
					(-)					
1K. Market Livestock -	1L. # Head	1M.	1N. \$/Unit	\$ Value	(4)					
Poultry	# пеац	Weight	\$/Unit	<u> </u>						
					2K	. Accrued In	nterest On:			\$ Amount
						(1) Curren				
						(2) Interme				
						(3) Long T	erm Liabilities			
10. Livestock Products	1P. Measure	1Q. # Units	1R. \$/Unit	\$ Value	2L.	. Current Po	ortion of Princip	al Due On:		
						(1) Interme	ediate Liabilitie	s		
						(2) Long T				
1S. Prepaid Expenses ar	nd Supplies				2M	I. Other Cur	rent Liabilities			
1T. Other Current Assets										
1U. TOTAL CURRENT A	SSETS (Iter	ns 1A throug	Jh 1T)		2N	. TOTAL C	URRENT LIAB	ILITIES (Items	2A through 2M)	

C INTERMEDIA	ETS				E INTERMEDIATE LIABILITIES						
3A. Machinery & Eq	uipment / F	arm Vehi	cles (Entere	d On Page 4	1)	5A	. Creditor			5B. Purpose	
3B. Breeding Stock	Raise	3C. ed/Purch	3D. # Head	3E. \$/Head	\$ Value		5C. Interest Rate	5D. Accrued Interest	5E. Payment Amount	5F. Next Payment Date (MM-DD-YYYY)	5G. Principal Balance
						(1)		•			
						(2)		1			
						(3)					
3F. Notes Receivable		1				(4)			1		
						(5)			1		
3G. Not Readily Market	table Bonds	and Securit	ies								
						(6)			<u> </u>		
3H. Other Intermediate	Assets					(7)		1	1		
3I. TOTAL INTERMED	IATE ASSET	ΓS (Items 3	A through 3H	I)		5H	. TOTAL INT	ERMEDIATE LIA	BILITIES (Item 5	G (1 through 7))	
D LONG TERM	ASSETS					F	LONG TE	RM LIABILIT	TES		
4A. Building and Imp	provements	S			\$ Value	6A.	Creditor			6B. Purpose	
						6	6C. Interest Rate	6D. Accrued Interest	6E. Payment Amount	6F. Next Payment Date	6G. Principal Balance
						(1)					
						(2)					
4B. Real Estate-Land	4C. Total Acres	4D. Crop Acres	4E. %Owned	4F. \$/Acre							
rtour Edució Edina	710100	710.00				(3)					
						(4)					
						(5)					
						(6)					
4G. Other Long Terr	m Assets	<u> </u>		<u> </u>	\$ Value	(7)					<u> </u>
4H. TOTAL LONG	TERM ASS	SETS (Ite	ms 4A thro	ugh 4G)		6H.	TOTAL LO	NG TERM LIA	ABILITIES (Iter	n 6GA (1 through 7))	
4I. TOTAL FARM A										s 2N, 5H, and 6H)	
							TOTAL FA				

G PERSONAL ASSETS H PERSONAL LIABILITIES									
	\$ Value	8A	. Creditor			8B. Purpose			
7A. Cash and Equivalents			8C. Interest Rate	8D. Accrued Interest	8E. Payment Amount	8F. Next Payment Date	8G. Principal 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	ABILITIES (Ite	m 6I and Item	81)			
		8K. TOTAL EQUITY (Item 7M minus Item 8J)							
I WARNING									
9A. SIGNATURE						9B. DATE			
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:					Date:				
Signature:					Date:				
Signature:					Date:				

J MACHINERY AND EQUIPMENT												
11A. Qty.	11B. Description	11C. Manufacturer	11D. Size/Type	11E. Condition	11F. Year	11G. Serial Number	11H. \$ Value					
					11I TC	OTAL \$ VALUE OF (ITEM 11H)						
	RM VEHICLES											
12A. Qty.	12B. Description	12C. Manufacturer	12D. Size/Type	12E. Condition	12F. Year	12G. Serial Number/VIN	12H. \$ Value					
						2I. TOTAL \$ VALUE OF (12H)						
12J. TOTAL \$ VALUE OF (ITEMS 11I AND 12I) TRANSFER TO ITEM 3A												