



Farm and Ranch Loan Application Checklist

In order for your loan approval to move swiftly and efficiently, you will need to prepare and/or collect the following information outlined in the checklist below.

Application Checklist

<input type="checkbox"/>	Farm & Ranch Questionnaire(s) [attached]
<input type="checkbox"/>	Application [attached]
<input type="checkbox"/>	Debt Schedule(s) [attached]
<input type="checkbox"/>	Borrowers Certification and Authorization(s)
<input type="checkbox"/>	Current personal balance sheet
<input type="checkbox"/>	Year-to-date business balance sheet with schedules
<input type="checkbox"/>	Previous 3 years business balance sheets and schedules (if available)
<input type="checkbox"/>	Previous 3 years tax returns, W-2's (if applicable) and Income/P&L Statements
<input type="checkbox"/>	Most recent 2 months of ALL asset accounts (bank, investments, etc.)
<input type="checkbox"/>	Most recent 30 days of paystubs (if applicable)



Farm and Ranch Financing Questionnaire

Date:

Applicant(s) Contact Info			
Name	Address	Telephone: Home/Cell	Email Address

Name of the entity the loan will be closed in:	
Tax ID:	
Name of Contact:	

1) What is the purpose of the loan? Purchase or Refinance If Purchase: What is the loan amount desired? \$ _____ Please attach Purchase Contract If Refinance: What is the loan amount desired? \$ _____ Explain what debts you are refinancing:

2) What type of loan product? Fixed or ARM?

3) Explain what the collateral will be (how many acres/description of land/equipment/etc.)?

4) What is the business plan for property?

5) Tell us about yourself:

Applicant Background: (Family history/Education)

Business Background: Do you have non-farm income?

Farming/Ranch Background: Are you a new farmer or experienced?

Community Involvement/Civic or Industry Affiliations:



Farm and Ranch Real Estate Loan Application

Under the Equal Credit Opportunity Act and Regulation B, Originator must verify how you intend to apply for credit.

If there is more than one party to this loan, all individuals intend to be joint applicants:

*****IMPORTANT***Please complete ENTIRE application. Every box needs to be filled in. If it does not apply, please input "n/a."**

APPLICANT INFORMATION - INDIVIDUAL

Select One: <input type="checkbox"/> Primary Applicant <input type="checkbox"/> Co-Applicant If co-applicant, provide relationship to primary applicant:				
Last Name:		First Name:		Middle Name:
E-mail:		Telephone:		Fax:
Street Address:		City:	State:	Zip: County:
Social Sec. #:		Date of Birth:		Marital Status: <input type="checkbox"/> Married (includes Separated) <input type="checkbox"/> Single (includes Divorced, Widowed, and Unmarried)
Year Began Farming:		Years at Current Address:		Are you a US Citizen or a Permanent Alien? <input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICANT INFORMATION - INDIVIDUAL

Select One: <input type="checkbox"/> Primary Applicant <input type="checkbox"/> Co-Applicant If co-applicant, provide relationship to primary applicant:				
Last Name:		First Name:		Middle Name:
E-mail:		Telephone:		Fax:
Street Address:		City:	State:	Zip: County:
Social Sec. #:		Date of Birth:		Marital Status: <input type="checkbox"/> Married (includes Separated) <input type="checkbox"/> Single (includes Divorced, Widowed, and Unmarried)
Year Began Farming:		Years at Current Address:		Are you a US Citizen or a Permanent Alien? <input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICANT INFORMATION - BUSINESS ENTITY

Select One: <input type="checkbox"/> Primary Applicant <input type="checkbox"/> Co-Applicant If co-applicant, provide relationship to primary applicant:				
Business Name:		Federal Tax ID #:		Telephone #:
Street Address:		City:	State:	Zip Code:
Contact Name & Title:				
Description of Business &/or Custom Services:				
<input type="checkbox"/> Corporation <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> General Partnership <input type="checkbox"/> Estate <input type="checkbox"/> Trust <input type="checkbox"/> Other _____				
Principal/Officer:		Home Address:		% Owned:
Principal/Officer:		Home Address:		% Owned:
				Title:
				Title:

***For more than two applicants, please fill out additional page 2's of the application.

LOAN INFORMATION

Loan Amount Requested:		Projected Loan To Value/Down Payment:		Requested Close Date:	
\$		% / \$			
Loan Purpose: <input type="checkbox"/> Purchase Real Estate <input type="checkbox"/> Refinance Real Estate <input type="checkbox"/> Cash Out <input type="checkbox"/> Other					
Payment Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual					
<u>Loan Product:</u>		<u>Requested Years Amortized:</u>			
_____		<input type="checkbox"/> 5 <input type="checkbox"/> 10 <input type="checkbox"/> 15 <input type="checkbox"/> 20 <input type="checkbox"/> 25 <input type="checkbox"/> 30			
(i.e. 20 Yr Fixed)					
<u>Source & Use of All Funds:</u> (i.e. funds from loan, down payment, etc.)		<u>Source of Cash:</u>		<u>Use of Cash:</u>	
				TOTAL:	

FINANCIAL INFORMATION

The following questions apply to all applicants.						
Existing Client? <input type="checkbox"/> Yes <input type="checkbox"/> No					Total Assets: \$	
Gross Farm Income: \$	Net Farm Income: \$	Net Non-Farm Income: \$	Source of Non-Farm Income:		Total Liabilities: \$	
	Yes	No			Yes	No
Are there any unsatisfied judgments against you?			Have you ever declared bankruptcy?			
Are you a defendant in any lawsuits or pending lawsuits?			Are any accounts past due?			
Have you had any property foreclosed or transferred by a deed in lieu in the past 7 years?					<input type="checkbox"/> Yes <input type="checkbox"/> No	
If you answered "Yes" to any of the above questions, please provide details (use separate sheet if necessary):						

DEBT SCHEDULE

Borrower's Name: _____				Today's Date: _____				
Creditor	Original Loan Amount	Date Loan Originated	Present Balance	Interest Rate	Maturity Date	Payments	Monthly/ Semi-Annual/ Yearly	Security
	\$		\$	%		\$		
	\$		\$	%		\$		
	\$		\$	%		\$		
	\$		\$	%		\$		
	\$		\$	%		\$		
	\$		\$	%		\$		
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	\$		\$	%		\$		
	\$		\$	%		\$		
	\$		\$	%		\$		
	\$		\$	%		\$		

OPERATING INFORMATION

Acres Owned:	
Acres Rented:	
Additional Comments:	

COLLATERAL INFORMATION

State of Property Location:	County of Property Location:	
Please complete one of the following (Metes & Bounds <u>OR</u> Abbreviated Legal Description):		
Estimated Appraised Value Of: Land: \$ _____ Residence: \$ _____ All other Improvements: \$ _____ Permanent Plantings: \$ _____ Total Value: \$ _____		
Are there any leases or rental agreements on the property? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, are there any leases or rental agreements for which the remaining term (Including any unexercised renewal options or rights) is 3 years or more? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are there any agreements for the property (including but not limited to leases and rental agreements) that include a purchase option, purchase right, right of first refusal, right of first offer or any similar right or offer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>If yes to any of these questions, please provide copies of the signed documents.</i>		
Leases and Encumbrances		
Manure Easements	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Wind Leases, Easements or Agreements	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Cell Tower	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Oil/Mineral or Gas Leases(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other (describe):	If yes, please provide copies of the signed documents.	
Who owns (or will own) the collateral?		
	Number of Acres:	Value Per Acre:
Tillable Acres:		
Irrigated: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Pasture Acres:		
CRP Acres:		

Years Remaining on Contract:		
\$/Acre:		
COLLATERAL INFORMATION (Continued)		
Wooded Acres:		
Permanent Plantings Acres:		
Timberland Acres:		
Buildings:		
Other:		
Total Acres		
Improvements		
Are there any improvements on the collateral?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any permanent plantings on the collateral?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, do the improvements represent a significant portion of repayment income?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, do the permanent plantings represent a significant portion of repayment income?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have any improvements, repairs or work taken place on the property within the last six months? <i>(including any that are currently underway or that will commence shortly)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there a residence on the collateral?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If there are any improvements and/or permanent plantings, provide a brief description.		
Water, Irrigation or Well Rights/Restrictions: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe:		
Environmental Hazard, Known or Suspected: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe:		

Crops (Specify Crop Type)	Projected		APPRX Yield	Actual		Actual		Actual	
	2017			2016		2015		2014	
	Acres	Yield		Acres	Yield	Acres	Yield	Acres	Yield
Crops									
Crops									
Crops									
Crops									
Total Land									
Owned Land									
Cash Rented									
Rent Expense									
Rent/acre									

Do you have any assets pledged as security for debt of others?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have any contingent liabilities or have you endorsed or guaranteed notes for others?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you obligated to pay alimony or child support?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>If you answered "Yes" to any of the above questions, please use separate sheet to provide details.</i>		
Do you have crop insurance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, at what level do you carry crop insurance? _____		
If yes, what type of crop insurance do you carry? _____		
For each applicant, what year are tax returns filed through? _____		
Do you have a $\geq 25\%$ interest in any other companies?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please list each company: _____		

