

**AGRICULTURAL CREDIT APPLICATION**  
To Finance/Lease Equipment that will be Used Primarily for Ag. Purposes

Dealer Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Business Style:**  Ind./Proprietorship  Partnership  Ltd. Partnership  Corp.  L.L.C. (Attach articles & operating agreement)  Trust (Attach agreement)  
\*If business style is Partnership, Ltd. Partnership, Corporation or L.L.C., please provide information on all partners, shareholders or members below.

Legal Name (Applicant) \_\_\_\_\_ SS# / Fed ID # \_\_\_\_\_  Married  
 Unmarried  
 Separated

Date of Birth \_\_\_\_\_ Mailing Address (include street address) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Legal Name (Co-Applicant) \_\_\_\_\_ SS# / Fed ID # \_\_\_\_\_ Date of Birth \_\_\_\_\_  Married  
 Unmarried  
 Separated

Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

**\* Names and addresses (including city & state) of Partners, Shareholders or Members**

1. _____	D.O.B. _____	Tax ID # _____	% Owned _____
2. _____	D.O.B. _____	Tax ID # _____	% Owned _____
3. _____	D.O.B. _____	Tax ID # _____	% Owned _____

Are all applicants US Citizens...  YES  NO \* State of Incorporation/Organization (REQUIRED) \_\_\_\_\_  
**Driver's License copies are required on all individuals and partners of partnerships applying for credit**

Years Farming \_\_\_\_\_  Full Time  Part Time Acres Owned \_\_\_\_\_ Acres Rented \_\_\_\_\_

Other Income (Amount & Source) \_\_\_\_\_ Primary Ag Products \_\_\_\_\_

**Total Assets** \_\_\_\_\_ **Total Liabilities** \_\_\_\_\_ **Gross Annual Revenue**  Greater than 1 million dollars  
(Complete balance sheet required on transactions over \$175,000)  Less than 1 million dollars

**References:**

Operating Lender _____	Contact _____	Phone _____	City/State _____
Equipment Finance Co. _____	Contact _____	Phone _____	City/State _____
Mortgage Holder _____	Contact _____	Phone _____	City/State _____

Are there any unsatisfied judgments against you.....  YES  NO Have you been declared bankrupt in the last 10 years.....  YES  NO

**PHYSICAL DAMAGE INSURANCE:**  Yes, I would like Insurance  No, but I will provide proof of my coverage

**Equipment Description:**

(Please use back of application for additional equipment)

Year: \_\_\_\_\_  
Make/Model: \_\_\_\_\_  
Description: \_\_\_\_\_  
Serial Number: \_\_\_\_\_  
Hours: \_\_\_\_\_

**Terms Requested:**

Contract/Lease: \_\_\_\_\_ Term: \_\_\_\_\_  
Fixed/Variable: \_\_\_\_\_ Rate: \_\_\_\_\_  
Pmt Frequency: \_\_\_\_\_ Plan: \_\_\_\_\_

**Terms of Sale:**

Sale/Lease Price	\$ _____
Sales Tax	\$ _____
<b>Sub Total</b>	<b>\$ _____</b>
Cash Down/Advance	\$ _____
Trade-in Allowance	\$ _____
Trade-in Description	\$ _____
<b>Total Down/Advance</b>	<b>\$ _____</b>
Doc Fee	\$ _____
Insurance	\$ _____
<b>Amount to Finance</b>	<b>\$ _____</b>

I/We are interested in financing some equipment with Diversified Financial. I/We understand and agree that you may assign or transfer this credit application to others to decide whether or not to extend credit. I/We authorize Diversified Financial to obtain credit reports for all permissible business purposes related to financing and leasing transactions with Diversified Financial. I/We authorize the above bank and business references to give any and all necessary information including balance sheets and income statements to you, your assignees or transferees, which will assist you in your credit inquiry. This application and financial statement is given for the purpose of obtaining credit. I/We hereby certify under penalty of law that the foregoing is a true and complete statement of my/our financial condition. In the event of any material change in my/our financial condition, I/we will notify you immediately in writing. I/We agree to periodically furnish financial or other information if requested by Diversified Financial. I/We hereby authorize Diversified Financial, Dealer and their respective assignees, transferees and agents to authenticate and file financing statements and amendments thereto regarding the requested financing and any subsequent financing which Diversified Financial may grant to us. See reverse side of application for additional disclosures.

**Applicant Signature** X \_\_\_\_\_, **Date** \_\_\_\_\_ I intend to apply for joint credit  YES  NO  
**Co-Applicant Signature** X \_\_\_\_\_, **Date** \_\_\_\_\_ I intend to apply for joint credit  YES  NO