Credit Application *Required

FARM CREDIT EXPRESS

Dealership Name*	Store Location*	Salesperson*

Applicant Type:* ◯ Individual/Sole Proprietorship ◯ Corporation ◯ LLC ◯ General Partnership ◯ Limited Partnership State of Organization*_____

Business Applicant Information—Please complete section in its entirety if applicant is a legal entity

Legal Name of Business	Tax ID Number	Business Phone	Business Fax		Years in Business*
Business Address (Principal Office/Headquarters)		**City**	**State**	**Zip**	**County**

Individual Applicant Information OR If Business Applicant, Please Provide Information for Officers, Owners, or Partners (As Guarantors)

Applicant Legal Name—As it Appears on Driver's License.* (Individual/Officer/Owner/Partner)	Co-Applicant Legal Name—As it Appears on Driver's License. (Individual/Officer/Owner/Partner)

Is Any Applicant (i) the Chief Executive Officer or President of a Farm Credit Bank, or (ii) an Employee or Director of the Farm Credit Administration?*
◯ Yes ◯ No

Applicant Social Security No.* (Taxpayer ID)	Applicant Date of Birth* **	Co-Applicant Social Security No. (Taxpayer ID)	Co-Applicant Date of Birth**

Address*				Address			
City*	**State***	**Zip***	**County***	**City**	**State**	**Zip**	**County**
Home Phone*	**Work Phone**		**Cell Phone**	**Home Phone**	**Work Phone**		**Cell Phone**

Email Address*	Email Address

Year Began Farming*	U.S. Citizen:* ◯ Yes ◯ No	Annual Salary*	Year Began Farming	U.S. Citizen: ◯ Yes ◯ No	Annual Salary
If Business Applicant—% Owned	**If Business Applicant—Title/Office Held**	**Other Income**	**If Business Applicant—% Owned**	**If Business Applicant—Title/Office Held**	**Other Income**

Agriculture Income (Most Recent Full Year)	Type of Farming Operation
Gross Annual Farm Income*	**Primary Farm Products* (Example: crop or livestock)**

Transaction Information:	☐ Loan ☐ Lease* ♦			Equipment Description
Amount Requested*	**Term (years)***	**Rate Lock Days** ☐ 30 ☐ 60 ☐ 90 ☐ Extended Closing	**Rate Quoted**	**Year / Make / Model / Serial Number or VIN**
Payments ☐ Monthly ☐ Quarterly ☐ Semi-annual ☐ Annual		**Repayment Schedule Beginning (month)**		

Transaction Details (sale price, trade description, net trade allowance, payoff amount, cash down payment, sales tax/tags)*

Dealer Fee	Special Program Applies? ◯ Yes ◯ No	If Yes, What Program?

Insurance Agent Name	Agent Phone Number

Note: Additional financial information may be required at the sole discretion of your Farm Credit / AgCredit lender/lessor.

**Must be 18 years of age or older

♦Leasing is not currently offered in Puerto Rico

Applicant Signature _____ Date _____ Co-Applicant Signature _____ Date _____

Disclosure info on back panel.