

Dealer Line: 1-800-510-6669

Dealer Fax: 1-800-284-6436

PROTECTED

CREDIT APPLICATION

Applicant Information		FCC Client: <input type="checkbox"/> Yes <input type="checkbox"/> No	Customer Number	Dist./Field
Legal Surname		Given Names		
Company Name (if applicable)		<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation		
R.R./Street:		City/Town	Province	Postal Code
Home Phone	Work Phone	Date of Birth (yyyy-mm-dd)	E-mail Address	
Geographic Area(County/R.M # / Parish)		Farm Location (twp,lot)	Custom Operation: <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Details in Comments	
Number of Years Managing a Farm:	Area Owned	Area Rented	Farm Type: (Check main enterprise only) <input type="checkbox"/> Grain <input type="checkbox"/> Hog <input type="checkbox"/> Poultry <input type="checkbox"/> Bison <input type="checkbox"/> Beef <input type="checkbox"/> Dairy <input type="checkbox"/> Other (Describe other) _____	

Co-Applicant / Partner

Legal Surname		Given Names		
Company Name (if applicable)		<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation		
R.R./Street		City/Town	Province	Postal Code
Home Phone	Work Phone	Date of Birth (yyyy-mm-dd)	E-mail Address	
Farm Location (twp,lot)		Custom Operation: <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Details in Comments		
Number of Years Managing a Farm:	Area Owned:	Area Rented	Farm Type: (Check main enterprise only) <input type="checkbox"/> Grain <input type="checkbox"/> Hog <input type="checkbox"/> Poultry <input type="checkbox"/> Bison <input type="checkbox"/> Beef <input type="checkbox"/> Dairy <input type="checkbox"/> Other (Describe other) _____	

Financial Information

Assets	Applicant	Co-Applicant	Liabilities	Applicant	Co-Applicant
Current Assets:			Current Liabilities:		
Cash on Hand			Line of Credit or Oper. Loans		
Savings/Investments			Credit Cards		
Accounts Receivable			Accounts Payable		
Crop Inventory			Other		
Feed and Supplies					
Market Livestock					
Other					
Term Assets:			Term Liabilities:		
Quota (dairy or poultry)			Quota		
Breeding Livestock			Livestock		
Equipment / Vehicles			Equipment / Vehicles		
Land			Land		
Buildings			Buildings		
Other			Other		
Total Assets			Total Liabilities		

Applicant Income Information

	APPLICANT	CO-APPLICANT
Past Year Gross Farm Income		
Past Year Gross Off Farm Income		
Employer's Name		
Number of Years Employed		

Business Credit References

Years Dealing	Name	Address	Telephone	Balance Owning
				\$
				\$
				\$
				\$

Additional Information: (Questions apply to both Applicant and the Co-Applicant/Partner)

1. Have you ever been named party to a lawsuit and/or judgement? Yes No If yes, attach explanation.
2. Have you ever filed for bankruptcy? Yes No If yes, attach explanation.
3. Would you like to apply for Life and Accident Insurance? Yes No

Dealer Comments:

This application is given for the purpose of obtaining credit. I/We authorize the above credit references, as well as any of my/our lessors, landlords and other past or present creditors to give any and all necessary information to you, your assignees or transferees which will assist you in your credit inquiry. I/We authorize you, your assignees or transferees to obtain, exchange and disclose credit information about me from and to any credit bureau or agency. I/We consent to a personal credit investigation.

I/We hereby instruct and authorize FCC to debit my/our above bank account for the loan payments required. FCC is also authorized to adjust these payments as may be necessary to account for any increase or decrease in the amount of these payments due to a change in the interest rate applicable, fees payable, insurance premiums payable or to comply with the terms of the Security Agreement (Conditional Sale of Farm Equipment). It is acknowledged that FCC has the right to cancel this pre-authorized payment authority at its discretion and without notice.

I/We authorize and direct Farm Credit Canada to pay the proceeds of my loan to the Dealer as specified in Loan Purpose and Terms above.

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.

Applicant's Signature X	Date	Co-Applicant's Signature X	Date
Dealer/Store	Sales Person		Code