



LOAN/LEASE APPLICATION
Include: PURCHASE ORDER

PO Box 1330 Willmar MN 56201
 Phone 1-800-450-1771
 (Ask for Dealer Credit)

FAX: 320-214-5046

Applicant		Are you a US Citizen ?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
First	MI	Last	Social Security or Tax ID #		
Drivers License No.	State	Issue Date	Expiration Date		
Current Street Address (personal residence address for individual application)		City	State	Zip	County
Years @ Current Address	Home Phone	Business Phone	Date of Birth	Years Farming/Business	Marital Status

Co-Applicant		Are you a US Citizen ?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
First	MI	Last	Social Security or Tax ID #		
Drivers License No.	State	Issue Date	Expiration Date		
Current Street Address (personal residence address for individual application)		City	State	Zip	County
Years @ Current Address	Home Phone	Business Phone	Date of Birth	Years Farming/Business	Marital Status

Business Structure					
<input type="checkbox"/> Proprietorship	<input type="checkbox"/> General Partnership	<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Co.	<input type="checkbox"/> Trust
State of Organization if Corp., LLC or Limited Partnership			State of chief executive office, if general ptrn		Organization Id. Number (if known)
Type of Business: <input type="checkbox"/> Grain <input type="checkbox"/> Dairy <input type="checkbox"/> Poultry <input type="checkbox"/> Swine <input type="checkbox"/> Beef <input type="checkbox"/> Other _____					
Insurance Carrier & Phone #: _____					
*Insurance requirements are to have United FCS as lessor/Lender Loss Payee to cover property physical damage and United FCS listed as Additional Named Insured (leases only) to cover general liability. Liability minimums are \$300,000 (\$1,000,000 if Gross Income is greater than \$500,000 or gross vehicle weight is 15,000 lbs. or more)					
Is the equipment purchased for custom use?		Yes or No	Estimated Usage level (hrs/yr; acres/yr; miles/yr)		

Financial Information			
Amount of Financing Requested	\$ _____	Total Assets:	\$ _____
Gross Annual Farm and Business Income:	\$ _____	Total Liabilities:	\$ _____
Gross Annual Other Income:**	\$ _____		
** Alimony, child support, or separate maintenance need not be disclosed unless relied upon for credit.			
Have you ever filed bankruptcy?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Current judgments against you:	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you a defendant in any pending lawsuits?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Are any accounts past due?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Signatures & Authorizations			
I (We) certify that the information provided is correct to the best of my (our) knowledge. I (We) understand that I (We) may be required to supply additional information and to provide security for the requested financing. In conjunction with this application, I (We) agree and consent that dealer/broker/lender/lessor/authorized agent may obtain a credit report or/and any other information relating to my (our) financial position. Any person or firm is hereby authorized to provide such information requested by dealer/broker/lender/lessor/authorized agent.			
WE UNDERSTAND THAT IF INSURANCE IS REQUIRED AS A CONDITION OF OUR LOAN APPROVAL, SUCH INSURANCE MAY BE OBTAINED FROM AN INSURER OF OUR CHOICE. I (We) understand that Lender shall not be responsible for any representation, guarantee, or warranty made by the manufacturer, distributor, Dealer, or any other party in connection with the item purchased, nor shall Lender be liable for any breach thereof.			
The above permissions and authorizations will apply to any creditor to whom this application is submitted.			
APPLICANT SIGNATURE _____	DATE _____	TITLE (for Corporation, Partnerships, & LLC's)	<input type="checkbox"/> 3 year <input type="checkbox"/> 4 year <input type="checkbox"/> 5 year <input type="checkbox"/> 6 year <input type="checkbox"/> 7 year
CO-APPLICANT SIGNATURE _____	DATE _____	TITLE (for Corporation, Partnerships, & LLC's)	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semiannually <input type="checkbox"/> Annually
The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicants income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law is the Farm Credit Administration, 1501 Farm Credit Drive, McLean, Virginia 22102-5990.			
IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.			
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