YOUR CHOICE LOAN

FOR OFFICE USE ONLY

Co-op Current Balance: Years with Co-op:





Loan Information								
Crop Year:	Co-op Account #:	Amount Requested (Min \$2,500 - Max \$350	0000	Agronomist Name				
			eds \$150,000, please fill out page #3)					
Applicant Information				-				
Entity Type			Company Name					
Sala Proprietor	0 "							
Sole Proprietor	Corporation		Address					
Sole Proprietor w/ dba	Limited Liability C	Company						
General Partnership	Trust		City					
Limited Partnership	Joint Venture		State Zip					
				Zip				
If Applicant is not an individual, the	authorized persons	completing this	Company Telephone	Company Tay ID Number				
Application MUST ALSO PROVIDE THEIR NAME AND SOCIAL SECURITY NUMBER. Such persons understand they are also considered to be an Applicant and that they will be required to sign personally as a borrower any loan approved by CCC.			Company relephone	Company Tax ID Number				
			Company Net Worth					
Primary Applicant or Principal Information			Co-Applicant or Principal 2 Information					
Full Legal Name (first, middle, last)			Full Legal Name (first, middle, last)					
Title (if applicable)			Title (if applicable)					
Address			Address					
City	State	Zip	City	State	Zip			
Home Phone	Mobile Phone		Home Phone	Mobile Phone				
Email Address			Email address					
Social Security Number	Date of Birth		Social Security Number	Date of Birth				
Net Worth (assets minus liabilities)	Working Capital		Net Worth	Working Capital				
Marital Status (married, separated, or unmarried – required for Sole Proprietorship)			Marital Status (married, separated, or unmarried – required for Sole Proprietorship)					
Spouse's Full Legal Name (first, middle, last)			Spouse's Full Legal Name (first, middle, last)					
Spouse's Social Security Number			Spouse's Social Security Number					
			,					
			l					

Potential Crop Buyer Information	(other than Hea	rtland Co-op)							
Buyer's Name	Address		City			State	Zip		Telephone
Any of crops fed to livestock?	es 🗌 No	If yes, appro	oximate %	6 of crops	s fe	d: %			
Collateral Value Calculation									
Commodity	Total Acres	Total Acres Rented	Average C	ash Rent	Ave	erage APH	Coveraç	ge Level (%)	Insurance Type *
								%	
								%	
								%	
*Insurance Type: RP, YP, APH, GRIP, GRP, Hai	il Only, CAT, None								
Crop Insurance Agent Informatio	n								
Agency name	Address			City			State	Zip	Telephone
Counties farmed in:									
The Applicant designated below is request of purchasing crop inputs at Heartland Cowill be made payable to the Member and PO Box 80,Sioux Center, IA, 51250, and any individuals executing this Authorizatic liability for damages of whatever kind whic CCC to release to Member any and all information as a liability for damages of whatever kind may Cooperative Credit Company, 128 Third Sthis Application shall be as valid as an orient After completing this application, prince	o-op, West Des not to any other d Member any ar on. The Applican ch may result be formation in CCC well as any inforr y result from CCC Street NW, Sioux ginal.	Moines, IA, (here party. This document all information it hereby releases cause of compliar is care, custody a mation CCC receives compliance with Center, IA, Fax:	einafter "Ment author anyone's you as the control with the and control wes pursuath this Author wes pursuath this Author author wes pursuath this Author aut	ember") for rizes the rest care, cus excustodian is Authoriz concerning to this Antorization and to this Antorization and to this Antorization and the rizes of t	r the elease tody of set tody of set tody of set tody of the Authorand	e stated crop yea se to Cooperative y and control con such records, bot in for Release of e Applicant, spec orization. The Ap Release. Please	r. The A ve Credi cerning the individed informati cifically in the submit	pplicant unders t Company, 12 the Applicant, sp ually and collection. The Applica on. The Applica nocluding, but no hereby releases the completed a	tands all loan advance 8 Third Street NW, becifically including tively, from any and al ant further authorizes t limited to, financial CCC from any and all application to

·	polication as directed. If a Partnership Corporation, or LLC, include balance sneet with supporting mber. Include any interest held by a co-applicant including spouse, if applicable. A bank prepared of filling out the balance sheet information below.
statement may be substituted and maned with the application in ned to	of filling out the balance sheet information below.
Balance Sheet Date	
Assets Cash, Checking, Savings	Liabilities CCC Loans
Securities	Operating Principal
Accounts Receivables	Accounts Payable
Investment in Growing Crop	Current Intermediate Debt
Feed & Grain Inventory	Current Long-Term Debt
Market Livestock	Leases
Government Payments	Other:
Other:	
Total Current Assets	Total Current Liabilities
Breeding Livestock	Notes Payable
Machinery & Equipment	Machinery & Equipment Loans
Vehicles	Vehicle Loans
Other:	Other:
Total Intermediated Assets	Total Intermediate Liabilities
Real Estate Value	Mortgage Loans
Buildings	Other:
Other:	
Total Long-Term Assets	Total Long-Term Liabilities
Total Assets	Total Liabilities
	Net Worth
	Net worth
For purpose of securing credit, the undersigned 1) certifies this s Cooperative Credit Company of any material change; and 3) ack	statement is true and correct as of the date specified; 2) agrees to promptly notify mowledges receipt of a copy of this statement.
After completing this balance sheet, print and sign prior to	submitting.
Signature	Signature

Applicant Name _____