with internet security a concern we recommend that you can with your social security number rather than email it on this form

FC										APPLICATI	ON FOR CREDIT	
	APPLICANT'S NAME (Last, First, Middle)			US CITIZEN YES ON OO	soc	SOCIAL SEC. NO.		DATE OF BIRTH (MM/DD/YY)		HAVE YOU EVER USED AFC BEFORE?		
GENERAL	MAILING ADDRESS			RESIDENT YES NO		CITY			TATE	ZIP CODE		
	MALINO ADDICESS			*					IAIL	ZIF CODE		
	PHYSICAL ADDRESS OF RESIDENCE (If Different Than Mailing Address)					COUNTY	COUNTY (REQUIRED)		E-MAIL ADDRESS			
	HOME TELEPHONE NUMBER						MARITAL STATUS			PARTNER STATUS		
	WORK OR CELL TELEPHONE NUMBER					Married [	Married ☐ Unmarried ☐ Separated ☐			Registered Domestic Partnership		
	COUNTY AND STATE IN WHICH EQUIPMENT WILL BE KEPT:  TYPE OF BUSINESS: LIMITED PARTNERSHIP LIMITED LIMIT											
	EQUIPMENT USE: FARM% CUSTOM WORK% FORESTRY% CONSTRUCTION/COMMERCIAL% INDUSTRIAL%  RENTAL YARD% PERSONAL/FAMILY/HOUSEHOLD% OTHER% (Please describe)											
INCOME – BUSINESS & S BANK INFO	DO YOU FARM? FULL TIME		_	PART TIME   #OF ACRES OWNED:			#OF ACRES RENTED;		YEARS IN FARMING:			
		KIND OF CROP/		NO. OF ACRES	RES INCOME DATE		ESTIMATED AMOUNT		OTHER INCOME		AMOUNT	
	SEASONAL INCOME	LIVESTOCK			<del>                                     </del>	- s	\$				s	
						s	25					
	LEGAL NAME UNDER WHICH YOU OPERATE IF PARTNE				RSHIP, LLC OR CORPORATION:			YEARS IN BUSINESS:				
	FED TAX ID#				ORGANIZA'	ORGANIZATION ID			STATE OF ORGANIZATION:			
	IF BUSINESS TYPE IS PARTNERSHIP, LLC OR CORPORATION, PLEASE PROVIDE INFORMATION FOR ALL PARTNERS, MANAGERS OR OFFICERS, EACH OF WHOM MUST SIGN AND											
	DATE APPLICATION OR CO-APPLICANT INFORMATION				ADDRESS		DATE OF BIRTH	70,00	PHONE	% OWNED	TITLE	
	PARTNER/OFFICER/MANAGER OR CO-APPLICANT		-K 3	OUAL SECTIO.	ADDITEGO		DATE OF BIRTH	TELEPHONE		% OWNED	HILE	
			+									
	DOMADAL							TELEPHONE				
	OPERATING PRIMARY LEND		NDER NAME	ME CITY, STATE		YEAR	TELEP	PHONE	-4	CONTACT		
	MACHINERY								-			
	EMPLOYER:			CITY, STATE:				YEAR				
	ANNUAL GROSS OCCUPATION/POSITION:			от	HER INCOME (A	INCOME (Alimony, Child Support, or Maintenance Need Not Be Revealed if You Do Not Wish sidered In Determining Your Credit Worthiness), Source of other income:						
	\$					OUNT \$						
ou selonsum ddress credi OTIC OTIC oders stual k elp the ophies or any o oders s part mploy out	ect on a reasonal ner report may be sof the consumer tworthy custome ETO MARRIE ection 766.70 William consumers to an an order powernment fight for a loan. Wher identifying docur ning below, I, who credit: (1) affirm to ated parties ("As ated parties ("As ated parties ("As ated parties") or this application ment investigation orize and direct the offers; (7) ack hyphicant, Co-Ar for herein; (9) aut authorize AFC AFC may monther so the account from another so	bly non-discrite a requested in reporting age, reporting age is, and that or DAPPLICA is. Stats. adverse provous the funding in you apply for nents. lether signing hat the inform C") to check or references an and while a in (including the AFC to use an ownedge that applicant and/othorize AFC to to grand record it, as allowed it, as allowed it uuroe, even if	minator n conne nency thusency the reserved in a consistency of the co	y basis related to the color with this applied to the color with this applied to the color with the color with a gencies makes SIDING IN With the color with the obligation to rism and money late we will ask you for ually as an Applican covided in this applicant and former engotic granted as a remation contained in results to determin a financing stateme to information about application to anyout the color regarding the color regarding the color of the color with the	in connection with the credit y he solvency and assessment procession of a ication. If you ask us, we will to ort. NOTICE TO OHIO RESI aintain separate credit histories SCONSIN: No provision of a fifthe creditor unless the credito to the creditor unless the credito to the creditor is incurred. NOT undering activities. Federal law your name, address, date of both trundering activities. Federal law your name, address, date of both and verify listed employment he polyers to release such informa subt of this application version account of the activities of the and the processing and the processing this transaction to others for the ontact me using any telephonal ille telephone. If this application with others information concer-	policies of the install you whether in IDENTS: The (incompanion on each individuancy marital proportion to the time IDEE TO ALL (incompanion of the purpose of the purpose of the purpose of initial of the purpose of t	surer and its ability to a consumer record a consumer record in a consumer record and upon request. The entry agreement, unital the credit is granted, CUSTOMERS: Usuncial institutions to obformation that will allower or manager of the Acose of obtaining credit ener questions about Alinstruct and authorize thorize and direct AFC to notificate and the consumer of the sufficient to perfect a diating, monitoring and the basis of this applications of the consumer	service the popport was requirmination recommendation recommendation in the service of the population of the service of the population of the servicing my and the servicing my a	olicy. NOTIC juested, and quire that all nts commiss ant under se a copy of the Act — Custo id record info fry you. We i co-Applicant and authorize experience w in consume the results of tempting to co youth the rest in collat y account, ar c extends cre may use aut using any te unposes, I a	CE TO NEW 1, if it was, we we creditors make we creditors make to not administers can report to the command of	CORK RESIDENTS (CORK RESIDENTS) All tell you the name a credit equally available compliance with this lab. Stats. or court decretement or decree, or hin Program — Enacted antifles each person was ee your driver's licent I am personally liabe LLC and/or its affilial op-Applicant and me; a in AFC's sole discretiont, credit investigation sion of credit (a "Deale y offers and the details of AFC to prepare and connection with financially permissible purpose of this application, I agriquent while service or email address Afving read the addition or gredit he addition or gredit and the addition or gredit he gred	
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If this application amount is \$250,000 or more, or if this application amount PLUS all existing debt payable to AGCO Finance LLC, its agents, servicers, affiliates and assigns are \$500,000, please provide fiscal year end income statement and balance sheet (personal and business).

(Indicate Partner/Officer/Manager/Guarantor)

(Indicate Partner/Officer/Manager/Guarantor)