

GENERAL	APPLICANT'S NAME (Last, First, Middle)		US CITIZEN YES <input type="checkbox"/> NO <input type="checkbox"/>	SOCIAL SEC. NO.	DATE OF BIRTH (DD/MM/YYYY) / /	HAVE YOU EVER USED AAC BEFORE? <input type="checkbox"/> NO <input type="checkbox"/> YES		
	MAILING ADDRESS			CITY	STATE	ZIP CODE		
	PHYSICAL ADDRESS OF RESIDENCE (If Different Than Mailing Address)			COUNTY (REQUIRED)		E-MAIL ADDRESS		
	HOME TELEPHONE NUMBER		MARITAL STATUS		PARTNER STATUS		YRS AT CURRENT ADDRESS	
	WORK OR CELL TELEPHONE NUMBER		Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated <input type="checkbox"/>		Registered Domestic Partnership <input type="checkbox"/>			
	COUNTY AND STATE IN WHICH EQUIPMENT WILL BE KEPT:							
	TYPE OF BUSINESS <input type="checkbox"/> LIMITED PARTNERSHIP <input type="checkbox"/> LIMITED LIABILITY COMPANY (LLC) <input type="checkbox"/> CORPORATION <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> GENERAL PARTNERSHIP <input type="checkbox"/> OTHER (Please specify) _____							
EQUIPMENT USE: FARM ___% CUSTOM WORK ___% FORESTRY ___% CONSTRUCTION/COMMERCIAL ___% INDUSTRIAL ___% RENTAL YARD ___% PERSONAL/FAMILY/HOUSEHOLD ___% OTHER ___% (Please describe) _____								
DO YOU FARM?		FULL TIME <input type="checkbox"/>	PART TIME <input type="checkbox"/>	# OF ACRES OWNED:	# OF ACRES RENTED:	YEARS IN FARMING:		
BUSINESS	LEGAL NAME UNDER WHICH YOU OPERATE IF PARTNERSHIP, LLC OR CORPORATIONS:					YEARS IN BUSINESS:		
	FED TAX ID #			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							
	PARTNER/OFFICER/MANAGER	SOCIAL SEC NO.	ADDRESS		DATE OF BIRTH	TELEPHONE	% OWNED	TITLE
PRIMARY LENDER NAME		CITY, STATE		YEAR	TELEPHONE	CONTACT		
INCOME - BANK INFO	OPERATING		EMPLOYER:		CITY, STATE:		YEARS:	
	ANNUAL GROSS INCOME:	OCCUPATION/POSITION:		OTHER INCOME (Alimony, Child Support, or Maintenance Need Not Be Revealed if You Do Not Wish it To Be Considered In Determining Your Credit Worthiness), Source of other income:				
	\$			AMOUNT \$	FREQUENCY			
	IF LOAN IS > \$100,000 AND < \$250,000		TOTAL ASSETS \$	TOTAL LIABILITIES \$		STATEMENT AS OF (MM/DD/YY)		

**NOTICE TO CALIFORNIA RESIDENTS:** If married, you may apply for a separate account. **NOTICE TO MAINE RESIDENTS:** You have the right of free choice in selecting the agent and insurer through or by which the insurance you obtain in connection with the credit you are applying for is placed. Your right of free choice is subject only to our right to approve the insurer you select on a reasonably non-discriminatory basis related to the solvency and assessment policies of the insurer and its ability to service the policy. **NOTICE TO NEW YORK RESIDENTS:** A consumer report may be requested in connection with this application. If you ask us, we will tell you whether or not a consumer report was requested, and, if it was, we will tell you the name and address of the consumer reporting agency that furnished the report. **NOTICE TO OHIO RESIDENTS:** The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio civil rights commission administers compliance with this law. **NOTICE TO MARRIED APPLICANTS RESIDING IN WISCONSIN:** No provision of any marital property agreement, unilateral statement under section 766.59 Wis. Stats. or court decree under section 766.70 Wis. Stats. adversely affects the interests of the creditor unless the creditor prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree, or has actual knowledge of the adverse provision when the obligation to the creditor is incurred. **NOTICE TO ALL CUSTOMERS:** USA PATRIOT Act – Customer Identification Program – Enacted 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 applies for a loan. When you apply for a loan we will ask you 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.

By signing below, I, whether signing individually as an Applicant, Co-Applicant or guarantor or as officer, partner or manager of the Applicant or Co-Applicant and whether or not I am personally liable for any credit: (1) affirm that the information provided in this application is true and correct and given for the purpose of obtaining credit; (2) instruct and authorize Agricredit Acceptance LLC and/or its affiliates and related parties ("AAC") to check credit, contact references, and verify listed employment history and answer questions about AAC's credit experience with Applicant, Co-Applicant and me; and authorize and instruct my references and current and former employers to release such information to AAC; (3) instruct and authorize AAC to obtain consumer reports on me, in AAC's sole discretion, as part of this application and while any credit granted as a result of this application remains unpaid; (4) acknowledge that AAC may retain any information obtained as part of the application process whether or not the requested credit is granted; and (5) authorize AAC to prepare and file against Applicant, Co-Applicant and/or me, a financing statement in form and substance acceptable to AAC sufficient to perfect a security interest in collateral arising in connection with financing applied for herein. If this application is primarily for personal, family or household purposes, I acknowledge having read the additional disclosures included on this application. I consent to AAC sharing with others information concerning me and AAC's decision whether or not to extend credit, if any, in accordance with applicable law.

<b>APPLICANT</b>	<b>CO-APPLICANT</b>
Signature (Individual) _____ Date _____	Signature (Individual) _____ Date _____
Signature _____ Title/Capacity _____ Date _____ (Indicate Partner/Officer/Manager/Guarantor)	Signature _____ Title/Capacity _____ Date _____ (Indicate Partner/Officer/Manager/Guarantor)