



# THE Farmers State Bank

209 Montana Avenue • Holton, KS 66436  
Phone 785.364.4691 • Fax 785.364.4330  
www.fsbks.com

## AGRICULTURE / COMMERCIAL LOAN APPLICATION

### **CREDIT REQUESTED:**

- Applicant Only
- Joint with Co-Applicant(s)

We intend to apply for **JOINT** credit:

Applicant: \_\_\_\_\_ Co-Applicant: \_\_\_\_\_

Application taken by:

- Phone  Internet  Oral

Date: \_\_\_\_\_

### **APPLICANT INFORMATION:**

Applicant is a:  Borrower  Guarantor  Cosigner  Grantor  Other \_\_\_\_\_

Name of Applicant(s):

_____	SSN/TIN: _____	DOB: _____
_____	SSN/TIN: _____	DOB: _____
_____	SSN/TIN: _____	DOB: _____
_____	SSN/TIN: _____	DOB: _____

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone:

Home: \_\_\_\_\_ Business: \_\_\_\_\_

E-Mail: \_\_\_\_\_

### **OPERATION & INCOME INFORMATION:**

Briefly describe your business or farm operation: \_\_\_\_\_

Monthly Salary: \_\_\_\_\_

Other Monthly Income: \_\_\_\_\_

### **BORROWER RELATIONSHIPS:**

Describe Existing Borrowing Relationships:

Name and Address of Lender	Type of Loan	Repayment Terms
_____	_____	_____
_____	_____	_____
_____	_____	_____

### **FUNDING REQUEST INFORMATION:**

Loan Amount Requested: \_\_\_\_\_

Specific Purpose/Use of Funds: \_\_\_\_\_

Projected Funding Date: \_\_\_\_\_

Repayment Terms Requested: \_\_\_\_\_

Repayment Sources: Primary: \_\_\_\_\_  
Secondary: \_\_\_\_\_

**COLLATERAL AVAILABLE TO PLEDGE:**

Type	#	Market Value	Location	Prior Liens	Owners
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**Environmental Risk Analysis**

Past and Present uses- \_\_\_\_\_

Government Contacts- \_\_\_\_\_

**ADDITIONAL REQUESTED INFORMATION:**

If checked, the following are requested in conjunction with this application. Your application will not be processed unless accompanied by the documents requested. The Farmers State Bank may supply you with some of the forms requested to be completed. Additional information may be requested during the application process.

- |                                      |                                |
|--------------------------------------|--------------------------------|
| _____ Last 3 Year's Tax Returns      | _____ Profit & Loss Statements |
| _____ Financial Statement            | _____ Inventory Listing        |
| _____ Projected Cash Flow            | _____ Business Plan            |
| _____ Listing of Accounts Receivable | _____ Other _____              |

**OTHER INFORMATION:**

Are there any unsatisfied judgments against any applicants?  No  Yes

If Yes, describe: \_\_\_\_\_

Have any applicants been declared bankrupt in the last 10 years?  No  Yes

If Yes, when? \_\_\_\_\_ Where? \_\_\_\_\_

Are any applicants obligated to make alimony, child support, or separate maintenance payments?  
 No  Yes

If Yes, details: \_\_\_\_\_

**APPLICANT SIGNATURE(S):**

By signing below, I certify that everything I have stated in this application and on all attached/related documents is true and correct to the best of my knowledge. Also, by signing, I authorize The Farmers State Bank to check my credit and employment history, answer questions others may have about my credit history with you in the future, and verify any information included in this application or related documents.

\_\_\_\_\_  
Applicant Date Applicant Date

\_\_\_\_\_  
Applicant Date Applicant Date