



# SCHERESKY AG SERVICE SUPPLY LOAN PROGRAM



## PRIMARY APPLICANT

Dealer Phone #:

Dealer Fax #:

Credit Desk Fax: 1-701-837-0095

Farm Credit Customer. Yes

Social Security Number:

First:

MI:

Last:

Address:

City:

County of Residence:

State:

Zip:

Phone:

## CO-APPLICANT

Social Security Number:

First Name:

MI:

Last:

## HISTORY

Year Began Farming:  Year Moved to Present Area:  Birthdate:

## LOAN REQUEST

Amount Loan Request: \$

Loan Due in Full:

Crops to be planted:

County(ies) where you farm:

Loan may be secured by a crop mortgage

## BORROWER FINANCIALS

Gross Farm Income: \$

Total Assets: \$

Non-Farm Income: \$

Total Liabilities: \$

PHOTOCOPIES OF THIS AUTHORIZATION MAY BE PRESENTED TO AND RELIED UPON AS OUR AUTHORIZATION TO RELEASE INFORMATION TO FARM CREDIT SERVICES (PCA, FLBA, FLCA, OR ACA, AS APPLICABLE).

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Salesman Contact Name: \_\_\_\_\_



Supply Loan apps.

Mail to:

Farm Credit Services of ND  
3100 10<sup>th</sup> St SW  
PO Box 70  
Minot, ND 58702-0070

Attn: Tammy