



**IMPORTANT APPLICANT INFORMATION:** Federal law requires financial institutions to obtain sufficient information to verify your identity. You may be asked several questions and to provide one or more forms of identification to fulfill this requirement. In some instances we may use outside sources to confirm the information. The information you provide is protected by our privacy policy and federal law.

# Application

Under the Equal Credit Opportunity Act and Regulation B, Dakota Mac must verify how you intend to apply for credit.

1.  If there is more than one party to this loan, **the following individuals and businesses/entities intend to be a joint applicant (all parties must initial below):**

Initials \_\_\_\_\_

## APPLICANT INFORMATION

Legal First Name:	Legal Middle Name:	Legal Last Name:		
OR Legal Trust/Business/Entity Name:	Address:			
City:	State:	ZIP:	Date of Birth:	Year Began Farming:
Fed. Tax ID/Social Sec. #:	County:	No. of dependents:	Email address:	
Telephone:	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (include single, divorced, widowed)	Current employer:	Length of employment:	
Cell phone:		Description of Business &/or Custom Services:		
Fax:		Are you a US Citizen or Permanent Alien?: <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Individual/Sole Proprietorship <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Trust (and choose one below) <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other _____ <input type="checkbox"/> Irrevoc. Trust <input type="checkbox"/> Revoc. Trust <input type="checkbox"/> Corporation				

## CO-APPLICANT INFORMATION

Legal First Name:	Legal Middle Name:	Legal Last Name:		
OR Legal Trust/Business/Entity Name:	Address:			
City:	State:	ZIP:	Date of Birth:	Year Began Farming:
Fed. Tax ID/Social Sec. #:	County:	No. of dependents:	Email address:	
Telephone:	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (include single, divorced, widowed)	Current employer:	Length of employment:	
Cell phone:		Description of Business &/or Custom Services:		
Fax:		Are you a US Citizen or Permanent Alien?: <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Individual/Sole Proprietorship <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Trust (and choose one below) <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other _____ <input type="checkbox"/> Irrevoc. Trust <input type="checkbox"/> Revoc. Trust <input type="checkbox"/> Corporation				

## OWNERSHIP/OFFICERS (if corporation, trust, or partnership)

Principal/Officer Name & Title:	Home Address:	% Owned:	Soc. Sec #:	Date of birth:
Principal/Officer Name & Title:	Home Address:	% Owned:	Soc. Sec #:	Date of birth:
Principal/Officer Name & Title:	Home Address:	% Owned:	Soc. Sec #:	Date of birth:
Principal/Officer Name & Title:	Home Address:	% Owned:	Soc. Sec #:	Date of birth:

### Loan Information

Amount Requested:	\$	Rate Quoted to Client:	* Rates and terms are subject to change. This request <b>has not</b> been rate locked.
Loan Purpose:	<input type="checkbox"/> Purchase real estate <input type="checkbox"/> Refinance real estate debt <input type="checkbox"/> Other (specify):		
Loan Type:	<input type="checkbox"/> Conventional <input type="checkbox"/> USDA/Farm Service Agency		
Payment Frequency:	<input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual		
<u>Loan Product</u>  (ie. 20 yr Fixed)	<u>Prepayment Options</u> <input type="checkbox"/> Modified Full Lockout <input type="checkbox"/> Partial Lockout <input type="checkbox"/> Full Open		<u>Requested Years Amortized</u> <input type="checkbox"/> 10 <input type="checkbox"/> 15 <input type="checkbox"/> 20 <input type="checkbox"/> 25 <input type="checkbox"/> 30

### Financial Information

Yrs at Current Address:	Existing Client?	Cash or Cash Equivalents:	Total Assets:	Total Liabilities:	
Gross Farm Income: \$	Net Farm Income: \$	Net Non Farm Income: \$	Source of Non Farm Income?		
	Yes	No		Yes	No
Do you have any contingent liabilities or have you endorsed or guaranteed notes for others?			Are any of your assets pledged as security for debts of others (ie pledge your land for child's LOC)?		
Are you obligated to pay alimony or support?			Property foreclosed or deed in lieu?		
Are there any judgments against you?			Have you ever declared bankruptcy?		
Are you a party to any lawsuits?			Are any accounts past due?		
Have you been in default with any lender or financial institution in the last 3 years?			Are there any leases/easements/agreements on the collateral (ie. manure, conservation, wind, oil & gas, etc.)?		
If you have answered "Yes" to any of the above questions, please give details (use separate sheet if necessary):					
I/we intend to engage/maintain agricultural production on the real property, which is the security for this application?				Yes	No
Do you have any ownership interest in other entities or Trusts? If yes, please provide details below:				Yes	No
<i>Name of entity/Trust</i>	<i>Type of entity</i> <i>Ptshp, LLC, Corp., Trust, etc.</i>	<i>Name of Applicant</i> <i>with ownership</i>	<i>Ownership %</i>		

- If more space is needed for additional entities, please complete these details on a blank sheet of paper.

### References (to be used for verification purposes)

	Bank/Company/Agency	Person to Contact	Phone Number	City/State	Balance Owed
Operating Lender					
Real Estate Mortgage					
Equip. Loan/Lease					
Hazard Insur. Agent					
Crop Insur. Agent					
Health Insur. Agent					
Life Insur. Agent					
Attorney					
Accountant					
Marketing Plan					
Estate Planning					

Tillable Acres Owned:		TOTAL Acres Owned:		Additional comments:
Tillable Acres Rented:		TOTAL Acres Rented:		

**Collateral Information (list only the land/items you intend to pledge as collateral for the loan request)**

<input type="checkbox"/> Real Estate			<input type="checkbox"/> Other (ie. crops, livestock, machinery, etc)	
<b>List the Legal Owners (or proposed owners) of the Real Estate:</b>			<b>List or describe the item:</b>	Estimated value :
State:	County:	Township Name:		\$
Section:	Township:	Range:		\$
Legal Description:				\$

Real Estate Property Description	Acres	Productivity Index or CSR*	Estimated Cash Rent/Acre	Estimated Real Estate Taxes/Acre
Tillable Acres:				
Irrigated: <input type="checkbox"/> Yes <input type="checkbox"/> No				
Pasture Acres:				
CRP Acres:				
Buildings:				
Other/Woods/Waste:				
<b>Total Acres</b>				

\* Crop Suitability Rating if applicable

**Improvements**

Improvements on Collateral:  Yes  No  
 If yes, is there a house on the Collateral?  Yes  No | House:  1-4 Family  Mobile home  Multifamily  
 The house will be:  Primary residence  Secondary Residence  Investment/Rental  Vacant  
 The street address, city & state of the house is: \_\_\_\_\_  
 If yes, provide description of all improvements: \_\_\_\_\_

**DISCLOSURE OF RIGHT TO RECEIVE COPY OF APPRAISAL.**

We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal, even if your loan does not close. You can pay for an additional appraisal for your own use at your own cost.

**SIGNATURES AND AUTHORIZATIONS**

I (We) certify that the information provided is correct to the best of my (our) knowledge. I (We) understand that I (We) may be required to supply additional information and to provide security for the requested financing. In conjunction with this application, I (We) agree and consent that lender and any third party purchaser to who lender may sell my (our) loan, may obtain a credit report or/and any other information relating to my (our) financial position. Any person or firm is hereby authorized to provide such information requested by lender. I (We) further certify that such parties may use and share with one another such consumer credit reports and credit scores for purposes of determining whether or not to approve my (our) application.

I (We) will notify Lender immediately if there is a change in any information provided on this application.

X \_\_\_\_\_ (sign & date)  
 Print name or title: \_\_\_\_\_

X \_\_\_\_\_ (sign & date)  
 Print name or title: \_\_\_\_\_

X \_\_\_\_\_ (sign & date)  
 Print name or title: \_\_\_\_\_

X \_\_\_\_\_ (sign & date)  
 Print name or title: \_\_\_\_\_

<b>TO BE COMPLETED BY OFFICER:</b> This application was taken by: <input type="checkbox"/> Face to face interview <input type="checkbox"/> Mail <input type="checkbox"/> Telephone <input type="checkbox"/> Internet/Email <input type="checkbox"/> Fax	<b>OFFICER SIGNATURE:</b> _____ Date Application Received by Officer: _____
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## AUTHORIZATION FOR RELEASE OF CREDIT INFORMATION

As a customer, or a proposed customer, of First Dakota National Bank dba Dakota MAC (Bank), I (we) agree to the following terms for the life of my (our) relationship with the Bank:

1. Any credit application or supporting information is the property of the Bank.
2. The Bank is authorized to make credit checks or inquiries concerning matters listed as assets, liabilities, and references. The Bank is authorized to make inquiries concerning subsequent transaction or loan servicing questions arising or resulting from a loan application received by the Bank.
3. Creditors and others are hereby authorized to disclose information relative to any loans, accounts, purchases, or other financial transaction, past, present, or future, and production and marketing information relative to my (our) business operations, to the Bank.
4. The Bank is authorized to share with credit reporting agencies and other creditors doing business with me (us) information regarding an application or any subsequent transactions, loan servicing actions, and general credit history resulting from an extension of credit. The Bank reserves the right to share all documents and information, which the Bank determines at its sole discretion is necessary or desirable to a sale, transfer, participation or assignment of a loan.
5. The Bank is authorized to share credit information with title companies and insurance agencies regarding approval for credit or loan servicing.
6. National Resources Conservation Service (NRCS), Farm Service Agency (FSA), and any other county, state, or federal agencies are authorized to make available Bank all aerial maps, land descriptions, water and soil data, commensurate or base property qualifications, grazing survey data, crop yield or production data, and other pertinent data covering any real estate owned, rented, and/or optioned by me (us).
7. The Bank is authorized to release financial information to my (our) attorneys, accountants, or other authorized agents, representatives, persons or entities that I/we designate. The Bank has permission to inspect and examine all of my financial records. A copy of this agreement shall be furnished to said attorneys, accountant, or other authorized agents, representatives, persons or entities as their authorization to send completed financial reports directly to the Bank.
8. This Authorization is supplemental and in addition to any terms or conditions agreed between me/us and the Bank in any prior or subsequent loan document.

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

\_\_\_\_\_  
Print name or title: \_\_\_\_\_ (sign)

\_\_\_\_\_  
Print name or title: \_\_\_\_\_ (sign)

\_\_\_\_\_  
Print name or title: \_\_\_\_\_ (sign)

\_\_\_\_\_  
Print name or title: \_\_\_\_\_ (sign)

Photocopies of this portion of the application may be presented to and relied upon by my/our creditors and others as evidence of authorization to release information to the Bank).

# ENVIRONMENTAL DISCLOSURE

Page 1

Property

Applicant Name: \_\_\_\_\_  
\_\_\_\_\_

Owner Name: \_\_\_\_\_  
(If different)

Please answer ALL questions:

## Real Property Security

Statement applies to : \_\_\_\_\_ All of the subject property \_\_\_\_\_ parcel(s) only\* (describe parcels) \_\_\_\_\_

If this statement will not apply to all parcels, complete a separate Environmental Disclosure for each parcel.

## Use Permit and Government Notices

1. Do you have a use permit for pesticides? Yes  No

If yes, what is the permit number? \_\_\_\_\_

2. Have you received notice from any governmental authorities concerning the removal of any toxic or hazardous waste material or substance from the property? Yes  No

Yes\_\_\_\_ If yes, briefly describe which authority, when notice was received and the nature of the notice.

3. Is subject property on a national or state hazardous waste site priority list? Yes  No

If yes, indicate which list(s) and any numerical score or rating assigned

## Water Sources, Domestic and Farm

Describe the source(s) of water for the property (if cropland is irrigated, complete Irrigation Supplement):

## Storage Tank(s) & Collection Sites

1. Are there any underground or aboveground storage tanks on the property? Yes  No

(ex: fuel, propane, etc) If yes, complete Schedule A

2. Are there any open pits, sumps or dumps on the property? Yes  No

3. Are there any drain water evaporation ponds? Yes  No

4. Are there any holding ponds with chemical wastes or effluent? Yes  No

If the answer to one or more of questions 2-4 is "yes", complete Schedule A or B.

**Handling, Storage/Disposal of Hazardous Substances, Materials, Waste**

1. Are pesticides or other hazardous substances stored on the property? Yes  No

Briefly describe where they are located (e.g., in the shed 150 feet SE of the farm residence):

\_\_\_\_\_  
\_\_\_\_\_

Do you have inventory of contents? Yes  No   
(If "Yes", attach a copy; if "No", briefly describe the contents).

\_\_\_\_\_

2. Have hazardous substances been disposed on this property? Yes  No

If yes, specify where and how you disposed of them: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Miscellaneous**

1. Is there any knowledge of contamination or threat of contamination from adjacent or nearby properties (e.g., security is located next to a dumpsite or an industrial plant with chemical holding ponds)? Yes  No

If yes, briefly describe problem: \_\_\_\_\_

\_\_\_\_\_

2. Are you aware of any hazardous waste problem existing on the real property offered as security (whether from your operation or previous owner's operations) that has not already been described above? Yes  No

If yes, briefly describe problem: \_\_\_\_\_

\_\_\_\_\_

3. Has any environmental audit, assessment or survey been conducted on the property? If so, please attach a copy. Yes  No



**Schedule - A**

(Supplement to Environmental Disclosure)

Name \_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_

Please provide ALL information:

Provide the following information for each storage tank, whether above or below ground (attach additional schedule if more than three tanks are involved:

	Tank 1	Tank 2	Tank 3
Location	<input type="text"/>	<input type="text"/>	<input type="text"/>
Above/below ground?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Age?	<input type="text"/>	<input type="text"/>	<input type="text"/>
In use?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Valid permit? (attach copy)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Current Contents	<input type="text"/>	<input type="text"/>	<input type="text"/>
Prior Contents	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tank wall & liner materials	<input type="text"/>	<input type="text"/>	<input type="text"/>
Secondary containment?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Has tank leaked?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Has tank been re-excavated? Why?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Has tank been tested?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of tester, if any	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date tested	<input type="text"/>	<input type="text"/>	<input type="text"/>
List any test exceptions	<input type="text"/>	<input type="text"/>	<input type="text"/>



**Schedule - B**

(Supplement to Environmental Disclosure)

Name \_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_

Please provide ALL information:

Provide the following information for each pit, sump, collection site or dump (attach additional schedule if more than three are involved:

	Site 1	Site 1	Site 1
Location	<input type="text"/>	<input type="text"/>	<input type="text"/>
Age?	<input type="text"/>	<input type="text"/>	<input type="text"/>
In use?	<input type="text"/>	<input type="text"/>	<input type="text"/>
Valid permit? (attach copy)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Current Contents	<input type="text"/>	<input type="text"/>	<input type="text"/>
Prior Contents	<input type="text"/>	<input type="text"/>	<input type="text"/>
Nearest well, drainage ditch or stream	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Agricultural Water Supply Questionnaire**

The Agricultural Water Supply Questionnaire is intended to provide specific detail on the source, quality, and cost of irrigation water. This form is required on any property in any state where irrigation affects the property value. It must be completed and signed by the Applicant(s) and must be presented to the Appraiser prior to the start of the appraisal (accompanied by the Engagement Letter). This will help to ensure the Appraiser is aware of water supply and quality as they begin their review of the collateral.

**PROPERTY INFORMATION**

1. Location:

County \_\_\_\_\_ APN \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
County \_\_\_\_\_ APN \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
County \_\_\_\_\_ APN \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(collectively, the “**Property**”)

Attach map(s) if available.

2. Total Acres: \_\_\_\_\_

3. Total Irrigated Acres: \_\_\_\_\_

4. Crops and anticipated water requirements:

a. Permanent Plantings:

Crop \_\_\_\_\_, Acres \_\_\_\_\_, Year Planted \_\_\_\_\_, Annual Water Requirements(inches) \_\_\_\_\_  
Crop \_\_\_\_\_, Acres \_\_\_\_\_, Year Planted \_\_\_\_\_, Annual Water Requirements(inches) \_\_\_\_\_  
Crop \_\_\_\_\_, Acres \_\_\_\_\_, Year Planted \_\_\_\_\_, Annual Water Requirements(inches) \_\_\_\_\_

b. Annual Plantings:

Crop \_\_\_\_\_, Acres \_\_\_\_\_, Annual Water Requirements (inches) \_\_\_\_\_  
Crop \_\_\_\_\_, Acres \_\_\_\_\_, Annual Water Requirements (inches) \_\_\_\_\_  
Crop \_\_\_\_\_, Acres \_\_\_\_\_, Annual Water Requirements (inches) \_\_\_\_\_

c. Total projected annual water requirement: \_\_\_\_\_

d. If anticipated significant (over 5%) variation from projected annual water requirements, explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Agricultural Water Supply Questionnaire**

	Make/ Model	Type	Serial Number	Age	# Acres Irrigated	Date of Installation
Water Delivery System #1						
Sprinkler System						
Pump/Gear Head						
Motor/Engine						
Water Delivery System #2						
Sprinkler System						
Pump/Gear Head						
Motor/Engine						
Water Delivery System #3						
Sprinkler System						
Pump/Gear Head						
Motor/Engine						

**WATER COST**

Required Water \_\_\_\_\_ \$/acre ft. \_\_\_\_\_ Total Water Cost \_\_\_\_\_

1. Source of the surface water: \_\_\_\_\_

Please check all that apply:

- |  |     |    |
|--|-----|----|
| Diverted                                   | Yes | No |
| Appropriative                              | Yes | No |
| Riparian Rights                            | Yes | No |
| Adjudicated                                | Yes | No |
| Stock in any mutual water company          | Yes | No |
| Receive any water from public water agency | Yes | No |
| Acquired from private party                | Yes | No |
| California Only:                           |     |    |
| Pre-1914 Water Rights                      | Yes | No |

If yes to any of the above, please describe:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How much surface water has historically been available to the Property?

Total Available: \_\_\_\_\_ Per Acre: \_\_\_\_\_

2. Projected future surface water?

Total Available: \_\_\_\_\_ Per Acre: \_\_\_\_\_

**GROUNDWATER SUPPLIES**

1. Is all groundwater quality suitable for the intended use?    Yes                  No

If no, what are the primary concerns, and can they be mitigated for agricultural production?

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2. Is the Property supplied with groundwater from wells on other property?    Yes                  No

If yes, what is the annual quantity of ground water provided by this well. \_\_\_\_\_

3. Is the water from the third-party well supplied pursuant to terms and conditions of an agreement?

Yes                  No

If yes, attach a copy of the agreement.

Is the agreement recorded?    Yes                  No

How much water is projected to be available annually from these wells? \_\_\_\_\_

<u>WELL DATA</u>	<u>WELL #1</u>	<u>WELL #2</u>
<b>Location:</b>		
<b>Date the well was placed in service:</b>		
<b>Depth of well in feet:</b>		
<b>Static water level:</b>		
<b>Drawdown at normal pumping volume:</b>		
<b>Normal Delivery in GPM or CFS:</b>		
<b>Date pump was installed:</b>		
<b>Make and type:</b>		
<b>Diameter of column:</b>		
<b>Rated capacity of bowls or pump in GPM:</b>		
<b>Date of most recent pump test (month-year):</b>		
<b>Tested by:</b>		
<b>Well Permit/Registration Number or designation (i.e. Grandfathered – AZ):</b>		
<b>Any shortage of water in the last 5 years?</b>		

**SUPPLEMENTAL WATER SUPPLIES**

1. Describe any historic alternative sources of surface water for the Property (e.g., spot market purchases, long term acquisitions)?

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2. Describe any projected alternative sources of surface water for the Property (e.g., spot market purchases, long term acquisitions)?

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**SIGNATURES**

The foregoing is to the best of our knowledge true and reflects the current and anticipated status of available water and water quality for the farm/ranch I/we offer as security for the requested loan.

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

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

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

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