

Hay and Forage Division  LEXION Combine Division

Dealer Name: \_\_\_\_\_ Sales Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Primary Applicant**

Business or Legal Name: \_\_\_\_\_  
 Entity Type:  Ind./Prop.  General Partnership  Ltd. Partnership  
 LLC  Corporation  Trust  
 Birth Date (Ind.): \_\_\_\_\_ SSN/TN: \_\_\_\_\_  
 Physical Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Co-Applicant**

Business or Legal Name: \_\_\_\_\_  
 Entity Type:  Ind./Prop.  General Partnership  Ltd. Partnership  
 LLC  Corporation  Trust  
 Birth Date (Ind.): \_\_\_\_\_ SSN/TN: \_\_\_\_\_  
 Physical Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Applicant Main Contact:** Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

**Names of Partners, Shareholders or Members (if not individual)**

Name:	Address/City/State:	Title:	% Owned:	SSN:
1) _____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____

State of Registration of Business: \_\_\_\_\_

**General Financial Information**

<u>Gross Farm Revenue:</u>		<u>Net Farm: Revenue:</u>	
Last Year _____	Est. This Year _____	Last Year _____	Est. This Year _____
Yrs in Farming: _____	Type of Crops: _____	# Acres Owned: _____	# Acres Rented: _____
Type of Livestock/# of Head: _____			
Other Income \$ _____	Position/Source: _____	Tenure: _____	

**Credit References**

Reference Name:	Contact:	Phone #:	City/State:
Bank/Primary Lender: _____	_____	_____	_____
Real Estate Lender: _____	_____	_____	_____
Equipment Finance Co: _____	_____	_____	_____

Are there any unsatisfied judgments against you? .....  Yes  No  
 Have you ever declared bankruptcy? .....  Yes  No  
 Are you a defendant in any pending lawsuit? .....  Yes  No  
 Are you currently past due or delinquent on any debt? .....  Yes  No  
 Do you or have you had any contracts with us? .....  Yes  No  
 Do you have any assets held in trust? .....  Yes  No  
 Have you guaranteed debt for others? .....  Yes  No

For the purpose of obtaining credit, I (we) certify to CLAAS Financial Services, LLC (collectively referred to as "CFS") that all information in this statement is true and correct and accurately describes my (our) financial condition as of date shown, and that there have been no material changes since then. I (we) grant permission to CFS to verify all information in this statement and to provide any information requested by my (our) creditors. I also grant CFS permission to obtain a credit report on me in connection with this transaction for all legitimate purposes. Such purposes include assisting in making a credit decision, reviewing my account, and assisting in taking collection activity. I (we) also grant permission to those creditors to provide all information requested by CFS. I (we) also authorize CFS to share all the foregoing information with its affiliates. I (we) release and waive all claims against CFS and my (our) other creditors for all acts or omissions which occur in verifying the above information.

**ECOA NOTICE: DISCLOSURE OF RIGHT TO REQUEST SPECIFIC REASONS FOR CREDIT DENIAL GIVEN AT TIME OF APPLICATION (BUSINESS CREDIT).** If your application for business credit is denied, you have the right to a written statement of the specific reasons for denial. To obtain the statement, please contact Credit Manager, CLAAS Financial Services, LLC, 475 Sansome Street, 19<sup>th</sup> Floor, San Francisco, CA 94111, 866-657-1442 within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for denial within 30 days of receiving your request for the statement. Notice: The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning the creditor is the Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Boulevard, Suite 100, Kansas City, MO 64108.

Primary Applicant Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Equipment**

Will this equipment be used for custom work or contracting?  Yes  No. If yes, what percent of the time? \_\_\_\_\_ %.

N/U	Year	Make	Equipment Description	Model	Serial Number	Hrs./Condition, If Used	Sales Price	
Equipment must be used exclusively for agricultural or commercial business purposes.							<b>TOTAL</b>	

**Trade-In Details**

Description of Trade-in Equipment	Trade Allowance	Amount Owed on Trade	Net Trade-In Allowance	Owed to Whom?
<b>TOTALS</b>				

**Transaction Details**

Select One:  Lease  Finance Contract

Payment Frequency:  Annually  Semi-Annually  Quarterly  Monthly  Other – Explain: \_\_\_\_\_

Select Months of Payment:  Jan  Feb  Mar  Apr  May  Jun  Jul  Aug  Sep  Oct  Nov  Dec

Term (in months): \_\_\_\_\_ Rate to Customer (include waiver info, if applicable): \_\_\_\_\_

**Important Information:** For total exposure of \$250,000 - \$400,000 the following will be required. For new CFS customer acquiring replacement equipment you will need to provide; 1) this completed finance application (all three pages), and 2) two most recent consecutive years' bank quality balance sheets. For existing CFS customer acquiring replacement equipment you will need to provide; 1) this completed finance application (all three pages), and 2) most recent bank quality balance sheet. Not all customers will qualify under these guidelines. Tax returns may be required if customer has other debt outstanding with CFS, derogatory personal or commercial credit, weaker finance statements or equity positions, or are acquiring expansion equipment. For total exposure exceeding \$400,000 you will need to provide the last three years tax returns and three most recent consecutive years' bank quality balance sheets. Other restrictions may apply. All applications are subject to credit approval by CLAAS Financial Services, LLC.

- 1. Selling Price of Equipment.....\$ \_\_\_\_\_
- 2. Sales Tax.....\$ \_\_\_\_\_
- 3. TOTAL (1 + 2).....\$ \_\_\_\_\_
- 4a. Cash Down / Advance Payment.....\$ \_\_\_\_\_
- 4b. Trade-In Allowance.....\$ \_\_\_\_\_
- 4c. Amount Owed on Trade.....(\$ \_\_\_\_\_ )
- 4d. TOTAL DOWN / ADVANCE PAYMENT (4a + 4b + 4c).....\$ \_\_\_\_\_
- 5. AMOUNT TO BE FINANCED (3 - 4d).....\$ \_\_\_\_\_

Note: Documentation and other fees not listed above may apply.

Please note any specifics on equipment, attachments, customer needs, special requests, etc.: \_\_\_\_\_

**Protection Plan Offer**

Insurance is required on all equipment financed through CLAAS Financial Services, LLC. CFS offers physical damage and, for leases, liability insurance. If you are interested in obtaining your coverage through us and financing your first premium payment as part of the contract, please check this box -  **YES, for Protection Plan.**

As of (date): \_\_\_\_\_

Statement of: \_\_\_\_\_  Individual  Corporation  Partnership  Trust

Please attach additional sheets if more space is required.

1. Current Assets	Current Value	5. Current Liabilities	Amount Owed
Checking, Savings & Market Securities		Accounts Payable	
Accounts Receivable		Accrued Interest (Current Liabilities)	
Inventory – Supplies		Accrued Interest (Intermediate Term Liabilities)	
Inventory – Crops for Sale		Accrued Interest (Long Term Liabilities)	
Investment – Crops in Field		Rental(s) / Lease(s)	
Livestock for Sale: # _____ Head @ \$ _____		Income Tax and Social Security	
		Real Estate Taxes and Property Taxes	
		Other Current Liabilities	
		A) Principle Due in 12 Months on Intermediate Liabilities	
Current Assets from Schedules		B) Principle Due in 12 Months on Long Term Liabilities	
<b>1, Total Current Assets</b>		<b>5. Total Current Liabilities</b>	

2. Intermediate Assets	6. Intermediate Liabilities							
Livestock # _____ Head @\$ _____	Lender	Collateral	# Due	Payment	Rate	Int. Due	Princ. Due	
Personal Vehicles								
Equipment								
Buildings								
Cash Value of Life Insurance								
	Intermediate Liabilities from Schedules							
	Less Principle Due in 12 Months on Intermediate Term							
<b>2. Total Intermediate Assets</b>	<b>6. Total Intermediate Liabilities</b>							

3. Long Term Assets				7. Long Term Liabilities							
Acres	Org Cost	Improv	Year	Lender	Collateral	# Due	Payment	Rate	Int. Due	Princ. Due	
Other Real Estate				Other Real Estate Debt							
				Long Term Liabilities from Schedules							
Long Term Assets from Schedules				Less Principle Due in 12 Months on Long Term							
<b>3. Total Long Term Assets</b>				<b>7. Total Long Term Liabilities</b>							

<b>4. TOTAL ASSETS</b>		<b>8. TOTAL LIABILITIES</b>	
Lease Obligations Due in 12 Month: <input type="checkbox"/> None Lessor(s): _____	Total Balance	<b>9. NET WORTH (TOTAL ASSETS – TOTAL LIABILITIES)</b>	