



Credit Application

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All the information in this application and all attachments is correct to the best of my knowledge. I authorize verification of employment and all financial and other information submitted with this application, including obtaining a credit report, to act on this application. I authorize making continued inquiries about such information and obtaining a credit report during the term of my lease(s) as necessary to administer my lease(s). As required by law, my identity will be verified. I authorize all past or present creditors to release any and all necessary credit information, and to respond fully to requests for information based on this application when transmitted by electronic or other means. The above permissions and authorizations will apply to any creditor to whom this application is submitted. I certify that the lease(s) applied for hereunder are for business, commercial, or agricultural purposes and not for personal, family, or household purposes.

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 that 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. A number of federal agencies share enforcement responsibility for this law. Determining which agency to contact depends on the type of creditor you dealt with. Consult the creditor to whom this application is addressed for information on its regulator, or contact The Federal Trade Commission, Consumer Response Center, Washington D.C. 20580, 1-877-382-4357.

I authorize any lessor making a lease applied for hereby to disclose to you, on a confidential basis, my personal, credit and other information (including without limitation post-closing information regarding the servicing of the lease and any defaults thereunder), whether or not you are a servicer of the lease.

Signature	Date	Signature	Date
(please print or type individual's name)	(Title-corporations only)	(please print or type individual's name)	(Title-corporations only)

Name(s) Individual or legal name of corporation, partnership, or organization	Contact
	Title (if corporation)
	Email address

SECTION 1					<input type="checkbox"/> Application on file - Skip sections 1 and 2, start with Section 3				
Address			Phone number		Mobile phone number				
City		State	County		Zip code	Fax number			
Billing name		Same as above		Attention		Title			
Billing address									
City		State		Zip code		Phone number			
<input type="checkbox"/> Individual/Sole proprietorship			<input type="checkbox"/> General partnership*			<input type="checkbox"/> Limited liability company*			
<input type="checkbox"/> Corporation*			<input type="checkbox"/> Limited partnership*			<input type="checkbox"/> Other			
*If corporation, partnership, or LLC attach either articles of incorporation, partnership agreement, or LLC articles of organization									
State of Incorporation					Date of Incorporation				
Briefly describe operation									
Year Began Farming (Producer)					Federal ID number (or Social Security number, if individual)				

SECTION 2				Yes	No					Yes	No
Are there any unsatisfied judgments against you?				<input type="checkbox"/>	<input type="checkbox"/>	Are you a co-maker, co-signer, or guarantor on any financial obligations?				<input type="checkbox"/>	<input type="checkbox"/>
Have you been declared bankrupt in the last ten years?				<input type="checkbox"/>	<input type="checkbox"/>	Are any accounts past due?				<input type="checkbox"/>	<input type="checkbox"/>
Are you a defendant in any pending lawsuit?				<input type="checkbox"/>	<input type="checkbox"/>						

PRINCIPAL INFORMATION						
Principal name+	Address/City/State/Zip code	Providing Guaranty?	Social Security #	# of Years Owned Business	Title (if corporation)	Ownership %
		<input type="checkbox"/> YES <input type="checkbox"/> NO				
		<input type="checkbox"/> YES <input type="checkbox"/> NO				
		<input type="checkbox"/> YES <input type="checkbox"/> NO				
		<input type="checkbox"/> YES <input type="checkbox"/> NO				

+Provide legible copy of each principal(s) or guarantor(s) driver's license

SECTION 3

Assets

Current Assets	
Cash/Savings	
Marketable Securities	
Accounts receivable	
Harvest Crops	
Investment in Growing Crops	
Livestock # _____ of head	
Total Current Assets	

Fixed Assets

Machinery & Equipment	
Vehicles	
Farm & Ranch Land # _____ of acres	
Other (list)	

Total Fixed Assets	

TOTAL ASSETS

Liabilities

Current Liabilities	
Accounts payable	
Current Portion of Long Term Debt	

Total Current Liabilities	

Long-term Liabilities

Mortgage	
Equipment - term loans/capital leases	
Other long-term liabilities	
Total Long-Term Liabilities	

Total Liabilities

Total Net Worth

TOTAL LIABILITIES & NET WORTH

SECTION 4 Credit References

Checking/ Savings Name	Person to contact	Phone Number	City/ State	Acct/ Loan Number	Acct Balance:
Operating Lender Name					<u>\$</u> High \$
Mortgage Holder Name					<u>Bal</u> High \$
Equipment contract holders					<u>Bal</u> High \$
					<u>Bal</u>

INCOME SUMMARY

Crop Type(s) / Total Acres	Gross Crop Income
	<u>\$</u>
Livestock Type(s) / # Of Head	Gross Livestock Income
	<u>\$</u>
Other Income/ Describe	Total Other Income
	<u>\$</u>

SECTION 5

Equipment to Purchase	Dealer Name	Salesman Name
Phone Number	Monthly, Quarterly, Semi or Annual	Purchase Price
		Requested Term