

GENERAL	APPLICANT'S NAME (Last, First, Middle)		US CITIZEN YES <input type="checkbox"/> NO <input type="checkbox"/> IF NO, PERMANENT RESIDENT YES <input type="checkbox"/> NO <input type="checkbox"/>	SOCIAL SEC. NO.	DATE OF BIRTH (MM/DD/YYYY) / /	HAVE YOU EVER USED AFC BEFORE?  <input type="checkbox"/> NO <input type="checkbox"/> YES	
	MAILING ADDRESS			CITY		STATE	ZIP CODE
	PHYSICAL ADDRESS OF RESIDENCE (If Different Than Mailing Address)			COUNTY (REQUIRED)		E-MAIL ADDRESS	
	HOME TELEPHONE NUMBER			MARITAL STATUS		PARTNER STATUS	
	WORK OR CELL TELEPHONE NUMBER			Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated <input type="checkbox"/>		Registered Domestic Partnership <input type="checkbox"/>	
	COUNTY AND STATE IN WHICH EQUIPMENT WILL BE KEPT:						
	TYPE OF BUSINESS: <input type="checkbox"/> LIMITED PARTNERSHIP <input type="checkbox"/> LIMITED LIABILITY COMPANY (LLC) <input type="checkbox"/> CORPORATION <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> GENERAL PARTNERSHIP <input type="checkbox"/> OTHER (Please specify) _____						
EQUIPMENT USE: FARM _____% CUSTOM WORK _____% FORESTRY _____% CONSTRUCTION/COMMERCIAL _____% INDUSTRIAL _____% RENTAL YARD _____% PERSONAL/FAMILY/HOUSEHOLD _____% OTHER _____% (Please describe) _____							



AG	DO YOU FARM?	FULL TIME <input type="checkbox"/>	PART TIME <input type="checkbox"/>	# OF ACRES OWNED:	# OF ACRES RENTED:	YEARS IN FARMING:	
	SEASONAL INCOME	KIND OF CROP / LIVESTOCK	NO. OF ACRES	INCOME DATE	ESTIMATED AMOUNT	OTHER INCOME	AMOUNT
					\$		\$

BUSINESS	LEGAL NAME UNDER WHICH YOU OPERATE IF PARTNERSHIP, LLC OR CORPORATION:					YEARS IN BUSINESS:	
	FED TAX ID #			ORGANIZATION ID		STATE OF ORGANIZATION:	
	IF BUSINESS TYPE IS PARTNERSHIP, LLC OR CORPORATION, PLEASE PROVIDE INFORMATION FOR ALL PARTNERS, MANAGERS OR OFFICERS, EACH OF WHOM MUST SIGN AND DATE APPLICATION OR CO-APPLICANT INFORMATION						
	PARTNER/OFFICER/MANAGER OR CO-APPLICANT	SOCIAL SEC NO.	ADDRESS	DATE OF BIRTH	TELEPHONE	% OWNED	TITLE

INCOME - BANK INFO	PRIMARY LENDER NAME		CITY, STATE		YEAR	TELEPHONE	CONTACT
	OPERATING						
	MACHINERY						
	EMPLOYER:			CITY, STATE:		YEARS:	
ANNUAL GROSS INCOME:		OCCUPATION/POSITION:		OTHER INCOME (Alimony, Child Support, or Maintenance Need Not Be Revealed if You Do Not Wish it To Be Considered In Determining Your Credit Worthiness), Source of other income:			
\$				AMOUNT \$ _____ FREQUENCY _____			

**NOTICE TO CALIFORNIA RESIDENTS:** If married, you may apply for a separate account. **NOTICE TO MAINE RESIDENTS:** You have the right of free choice in selecting the agent and insurer through or by which the insurance you obtain in connection with the credit you are applying for is placed. Your right of free choice is subject only to our right to approve the insurer you select on a reasonably non-discriminatory basis related to the solvency and assessment policies of the insurer and its ability to service the policy. **NOTICE TO NEW YORK RESIDENTS:** A consumer report may be requested in connection with this application. If you ask us, we will tell you whether or not a consumer report was requested, and, if it was, we will tell you the name and address of the consumer reporting agency that furnished the report. **NOTICE TO OHIO RESIDENTS:** The Ohio laws against discrimination require that all creditors make credit equally available to all credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio civil rights commission administers compliance with this law. **NOTICE TO MARRIED APPLICANTS RESIDING IN WISCONSIN:** No provision of any marital property agreement, unilateral statement under section 766.59 Wis. Stats. or court decree under section 766.70 Wis. Stats. adversely affects the interests of the creditor unless the creditor prior to the time the credit is granted, is furnished a copy of the agreement, statement or decree, or has actual knowledge of the adverse provision when the obligation to the creditor is incurred. **NOTICE TO ALL CUSTOMERS:** USA PATRIOT Act – Customer Identification Program – Enacted to help the government fight the funding of terrorism and money laundering activities. Federal law requires all financial institutions to obtain, verify and record information that identifies each person who applies for a loan. When you apply for a loan we will ask you for your name, address, date of birth and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

**By signing below,** I, whether signing individually as an Applicant, Co-Applicant or guarantor or as officer, partner or manager of the Applicant or Co-Applicant and whether or not I am personally liable for any credit: (1) affirm that the information provided in this application is true and correct and given for the purpose of obtaining credit; (2) instruct and authorize AGCO Finance LLC and/or its affiliates and related parties ("AFC") to check credit, contact references, and verify listed employment history and answer questions about AFC's credit experience with Applicant, Co-Applicant and me; and authorize and instruct my references and current and former employers to release such information to AFC; (3) instruct and authorize AFC to obtain consumer reports on me, in AFC's sole discretion, as part of this application and while any credit granted as a result of this application remains unpaid; (4) authorize and direct AFC to share the results of any credit report, credit investigation or employment investigation (including the information contained in this application) with any dealer, manufacturer or other person assisting me in attempting to obtain an extension of credit (a "Dealer"); (5) authorize and direct AFC to use any such results to determine if I qualify for an offer of credit; (6) authorize and direct AFC to notify a Dealer about whether I qualify for any offers and the details of any such offers; (7) acknowledge that AFC may retain any information obtained as part of the application process whether or not the requested credit is granted; (8) authorize AFC to prepare and file against Applicant, Co-Applicant and/or me, a financing statement in form and substance acceptable to AFC sufficient to perfect a security interest in collateral arising in connection with financing applied for herein; (9) authorize AFC to provide information about this transaction to others for the purpose of initiating, monitoring and servicing my account, and for other legally permissible purposes; and (10) authorize AFC to give a copy of this application to anyone who has agreed to pay debts incurred on the basis of this application. If AFC extends credit as a result of this application, I agree that (a) AFC may monitor and record telephone calls regarding the account created to assure the quality of services or for other reasons; (b) AFC may use automatic dialing equipment while servicing or collecting the account, as allowed by law; and (c) AFC may contact me using any telephone number or email address I provide to AFC or using any telephone number or email address AFC obtains from another source, even if the number is for a mobile telephone. If this application is primarily for personal, family or household purposes, I acknowledge having read the additional disclosures included on this application. I consent to AFC sharing with others information concerning me and AFC's decision whether or not to extend credit, if any, in accordance with applicable law.

<b>APPLICANT</b>		<b>CO-APPLICANT</b>	
Signature (Individual)	Date	Signature (Individual)	Date
Signature	Title/Capacity (Indicate Partner/Officer/Manager/Guarantor)	Signature	Title/Capacity (Indicate Partner/Officer/Manager/Guarantor)
Date	Date	Date	Date

