

# BARN APPLICATION & FINANCIAL QUESTIONNAIRE

## PERSONAL

TODAY'S DATE:			
PREFERRED BARN TYPE (LAYER/BROILER/EITHER):			
APPLICANT NAME:		AGE:	
SOCIAL SECURITY NUMBER:			
SPOUSE'S NAME:		AGE:	
SOCIAL SECURITY NUMBER:			
ADDRESS:		FIRE NUMBER:	
CITY/STATE/ZIP:			
COUNTY:		TOWNSHIP:	
NUMBER OF CHILDREN:		AGE(S):	
HOME PHONE:			
BUSINESS PHONE:			
<b>ONE BUSINESS REFERENCE WHERE YOU TRADE</b>			
NAME OF BUSINESS:			
ADDRESS:		TELEPHONE #:	
CITY/STATE/ZIP:			
<b>THREE REFERENCES, OTHER THAN RELATIVES OR BUSINESSES</b>			
1) NAME:		TELEPHONE #:	
2) NAME:		TELEPHONE #:	
3) NAME:		TELEPHONE #:	

**EMPLOYMENT**PREVIOUS/CURRENT  
EMPLOYMENT TYPE:

APPLICANT'S EMPLOYER:

LENGTH OF EMPLOYMENT:

FROM:

TO:

SPOUSE'S EMPLOYER:

LENGTH OF EMPLOYMENT:

FROM:

TO:

**FUTURE STATE**DESCRIBE YOUR CURRENT  
EMPLOYMENT AND LIFESTYLE:DESCRIBE HOW HAVING A  
CHICKEN BARN WILL FIT INTO  
YOUR FUTURE:**NAME OF BANK THAT YOU MORTGAGE WITH**

NAME OF BANK:

TELEPHONE #:

ADDRESS:

CITY/STATE/ZIP:

TOTAL INCOME FROM FARM (not counting expenses):

\$

**FARM QUESTIONNAIRE**

VALUE OF LIVESTOCK:

\$

MORTGAGE BANK:

AMOUNT LEFT ON  
MORTGAGE:

\$

VALUE OF MACHINERY:

\$

MORTGAGE BANK:

AMOUNT LEFT ON  
MORTGAGE:

\$

VALUE OF FEED ON HAND:

\$

MORTGAGE BANK:

AMOUNT LEFT ON  
MORTGAGE:

\$

VALUE OF ACRES OWNED:

\$

NUMBER OF ACRES OWNED:

MORTGAGE BANK:

AMOUNT LEFT ON  
MORTGAGE:

\$

<b>OTHER DEBTS</b>			
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ITEM:		VALUE:	\$
MORTGAGE BANK:		AMOUNT:	\$
ITEM:		VALUE:	\$
MORTGAGE BANK:		AMOUNT:	\$

<b>FINANCIAL STATUS</b>	
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CASH IN BANK:	\$
STOCKS/BONDS/NOTES:	\$
TOTAL ASSETS:	\$
TOTAL LIABILITIES:	\$
TOTAL NET WORTH:	\$

<b>PLEASE GIVE DETAILED DIRECTIONS TO YOUR PLACE OF RESIDENCE</b> (Please use back of page if needed)
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<b>STATEMENT OF AGREEMENT &amp; AUTHORIZATION</b>
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I HEREBY AFFIRM THAT THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND COMPLETED TO THE BEST OF MY KNOWLEDGE. I ALSO AGREE THAT FALSIFIED INFORMATION OR SIGNIFICANT OMISSIONS MAY DISQUALIFY ME FROM FURTHER CONSIDERATION IN BECOMING A GROWER AND MAYBE CONSIDERED JUSTIFICATION FOR DISMISSAL IF DISCOVERED AT A LATER DAY. I AUTHORIZE PERSONS, CURRENT AND PREVIOUS EMPLOYERS AND ORGANIZATIONS, BANKS OR BUSINESSES NAMED IN THIS APPLICATION TO PROVIDE ANY RELEVANT INFORMATION THAT MAYBE REQUIRED THROUGHOUT THE BARN SCREENING PROCESS.

APPLICANT'S SIGNATURE:	
DATE:	
SPOUSE'S SIGNATURE:	
DATE:	