



4-H & FFA

Zero Interest Ag Loan Program

We will need the following items to process your loan:

- ❑ **Business Plan & Project Information**
- ❑ **Express Loan Application**
- ❑ **Proof of income for household income (most recent pay stub or last 2 years income tax return if self employed)**

Instructions for Application— Student will be the applicant and the parent or cosigner will be the co-applicant.

Please remember to sign your loan application. You can turn in your completed application, business plan, and proof of cosigners income into our office:

304 Sutton Place, Santa Rosa 95407

Or you can fax it to us at **707-584-3811** or call to have a secured link emailed to you to upload the application.

If you have any questions feel free to call Rebecca at **707-584-0384**.



Sonoma County Grange Credit Union 4-H / FFA
Agriculture Loan Program
Project Information

Member Name : _____

Address: _____

(street address)

(City)

(State)

(Zip Code)

Home Phone #: _____

Cell Phone #: _____

Email: _____

4-H Club/ FFA Chapter: _____

Project Advisory/Leader: _____

School Attending: _____

Grade Level in School: _____ Approximate GPA: _____

Type of Project: Hog Lamb Steer Goat Other

By signing below I am aware that all information given is true to the best of my knowledge. If there are any changes to my Business Plan, I will inform Sonoma County Grange Credit Union as soon as possible.

Signature: _____ Date: _____

As the 4-H Leader or FFA Advisor, I am aware that this student is participating in a livestock market animal project. I am aware that the information given on this Business Plan is correct and true and if there are any changes I will be sure to let the Credit Union know.

Leader/ Advisor Signature: _____ Date: _____

Sonoma County Grange Credit Union 4-H / FFA
Student Loan Program
Business Plan

1. Explain how you will begin the project. Include where the project will be purchased, facilities to keep the project, and how you plan to finance the project. (Example: A market steer project may be purchased from a local breeder and housed in a neighbors pasture where you can feed and care for it daily.)

2. Explain how you will manage your project in relation to earning income from the project. (Example: I will be daily feeding and cleaning my lambs.)

3. Explain how you plan to repay your loan. (Example: I plan to sell my hog at the Sonoma County Fair.)

Sonoma County Grange Credit Union 4-H / FFA
 Student Loan Program
 Business Plan

4. Prepare a budget of your estimated expenses for the project and projected income.

Estimated Expenses	Amount
Total Estimated Expenses	

Estimated Income	Amount

Total Estimated Expenses		-	Total Estimated Income	=	Estimated Net Income

SONOMA COUNTY GRANGE CREDIT UNION

304 Sutton Place
 Santa Rosa, California 95407
 Phone: (707) 584-0384

LOANLINER

Express Application

Individual Credit: You must complete the **Applicant** section about yourself and the **Other** section about your spouse if:
 1. you live in or the property pledged as collateral is located in a community property state (AK, AZ, CA, ID, LA, NM, NV, TX, WA, WI),
 2. your spouse will use the account, or
 3. you are relying on your spouse's income as a basis for repayment. If you are relying on income from alimony, child support, or separate maintenance, complete the **Other** section to the extent possible about the person on whose payments you are relying.
Joint Credit: If you are applying with another person, complete the **Applicant** and **Other** sections.
Guarantor: Complete the **Other** section if you are a guarantor on an account/loan.

Check below to indicate the type of account(s) and type of credit for which you are applying. Married Applicants may apply for a separate account.

LOANLINER® Account/Loan: Individual Joint Amount Requested \$ _____ Purpose/Collateral: _____
 (Including ATM/Debit Card Access to the Account if Available)

Payment Protection Single Credit Disability Insurance Single Credit Life Insurance Joint Credit Life Insurance
 Check coverage(s) desired. The credit union will disclose the cost of this voluntary insurance to you. A separate insurance election which discloses the terms and conditions must be signed for coverage to become effective.

Applicant		Other: <input checked="" type="checkbox"/> Co-Applicant <input checked="" type="checkbox"/> Spouse <input checked="" type="checkbox"/> Guarantor	
NAME (Last - First - Initial)		NAME (Last - First - Initial)	
MOTHER'S MAIDEN NAME		MOTHER'S MAIDEN NAME	
ACCOUNT NUMBER	SOCIAL SECURITY NUMBER	ACCOUNT NUMBER	SOCIAL SECURITY NUMBER
DRIVER'S LICENSE NUMBER / STATE	E-MAIL ADDRESS	DRIVER'S LICENSE NUMBER / STATE	E-MAIL ADDRESS
BIRTH DATE	HOME PHONE	BIRTH DATE	HOME PHONE
	BUSINESS PHONE/ EXT.		BUSINESS PHONE/ EXT.
PRESENT ADDRESS (Street - City - State - Zip)		PRESENT ADDRESS (Street - City - State - Zip)	
<input type="checkbox"/> OWN <input type="checkbox"/> RENT		<input type="checkbox"/> OWN <input type="checkbox"/> RENT	
YEARS AT THIS ADDRESS		YEARS AT THIS ADDRESS	

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 TO ORDER: 1-800-356-5012

CONTINUED ON REVERSE SIDE

AXX733

Applicant

MORTGAGE/RENT OWED TO:

MORTGAGE BALANCE	MONTHLY PAYMENT	INTEREST RATE
\$ _____	\$ _____	_____ %

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:
 MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

Employment/Income START DATE _____

NAME AND ADDRESS OF EMPLOYER _____

NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.

EMPLOYMENT INCOME _____ OTHER INCOME _____
 \$ _____ PER _____ \$ _____ PER _____

NET GROSS SOURCE _____

State Law Notices

OHIO RESIDENTS ONLY: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy 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.

WISCONSIN RESIDENTS ONLY: (1) No provision of any marital property agreement, unilateral statement under §766.59, or court decree under §766.70 will adversely affect the rights of the Credit Union unless the Credit Union is furnished a copy of the agree-

Other: Co-Applicant Spouse Guarantor

MORTGAGE/RENT OWED TO:

MORTGAGE BALANCE	MONTHLY PAYMENT	INTEREST RATE
\$ _____	\$ _____	_____ %

COMPLETE FOR JOINT CREDIT, SECURED CREDIT OR IF YOU LIVE IN A COMMUNITY PROPERTY STATE:
 MARRIED SEPARATED UNMARRIED (Single - Divorced - Widowed)

Employment/Income START DATE _____

NAME AND ADDRESS OF EMPLOYER _____

NOTICE: ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT CHOOSE TO HAVE IT CONSIDERED.

EMPLOYMENT INCOME _____ OTHER INCOME _____
 \$ _____ PER _____ \$ _____ PER _____

NET GROSS SOURCE _____

ment, statement or decree, or has actual knowledge of its terms, before the credit is granted or the account is opened. (2) Please sign if you are not applying for this account or loan with your spouse. The credit being applied for, if granted, will be incurred in the interest of the marriage or family of the undersigned.

SIGNATURE FOR WISCONSIN RESIDENTS ONLY _____ DATE _____

Signatures

You promise that everything you have stated in this application is correct to the best of your knowledge. If there are any important changes you will notify us in writing immediately. You authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, increase, renewal, extension, or collection of the credit received. You understand that the Credit Union will rely on the information

in this application and your credit report to make its decision. If you request, the Credit Union will tell you the name and address of any credit bureau from which it received a credit report on you. It is a federal crime to willfully and deliberately provide incomplete or incorrect information on loan applications made to federal credit unions or state chartered credit unions insured by NCUA.

(SEAL) _____ DATE _____

(SEAL) _____ DATE _____