* About You

|  |
| --- |
| **Name:**  |
| **Email Address:** |
| **Date:**  |

* Business Overview

**Date your operation started: \_\_\_\_\_\_\_\_\_\_**

What is the ownership structure of your operation?

[ ] Sole Proprietorship [ ] LLC [ ] Partnership [ ] Cooperation

* The other owners included are:
* The ownership percentage for each owner is:
* **How did your operation start?**

Do you trade labor for use of machinery with family or another operator?

[ ] Yes [ ] No

Tell us the breakdown of your farmed acres.

* Attach Farms Operated Schedule, which includes the breakdown of your acres. If you are unable to attach the Farms Operated Schedule, fill out the following
* Total Acres Cash Rented:

 Average Rent:

 Total number of landlords:

* Total Acres Crop Shared:

 Total number of landlords:

* Total Acres Owned:

Tell us what makes your operation unique.

* Do you have any specialty crops? (i.e. seed corn, non GMO, seed beans)
* Livestock? *If yes, list type, operation type, daily rate of grain, income type below.*

[ ] Yes [ ] No

* Do you have forward contracting opportunities with grain or livestock? (i.e. food processor, livestock integrator) If so, please list in the area below.
* List any discount purchasing opportunities that you have (i.e. family farms, land lords, seed sales).
* List any alliances, mentors, personal or business-related relationships or networking arrangement directly tied to your operation:

* Farm Goals
* What are your short-term goals for the next 1-5 years?

* What is your realistic vision and long-term (5-30 years) goals for this farming operation (growth, diversification, etc.)?

* Is there a transition plan within your operation (i.e. machinery buyout)?
* Management Skills

What **financial management** skills have you obtained to run a successful operation?

* My education includes:

[ ] High School Degree [ ] College Degree [ ] Specialized Training (trade school, etc.) [ ] Other Education

 If other, please specify below.

* I have taken the following courses/programs…

* Please list agricultural-related organizations you are a member of and the number of years you have been involved:

* Have you attended Farm Credit courses? If so, please list below:

* Other financial skills include:

What **production** skills have you obtained to run a successful operation?

* My on-farm experience includes:
* I utilize the following farming practices:
* Technology efficiency that my operation has include:
* Other:
* Risk Management

Describe the following:

* My operational strengths:
* My operational weaknesses:
* Opportunities available for my operation:
* Threats to my operation:
* Marketing Strategy

Do you have a written marketing strategy?

 [ ] Yes [ ] No

*If yes, please attach your written strategy.*

* If no, my unwritten strategy includes:

Does your operation have on-farm storage?

 [ ] Yes [ ] No

If *yes*, how many bushels?

My marketing advisers include:

My goal is to forward sell \_\_\_\_\_\_\_% of my crop by \_\_\_\_\_\_\_\_\_\_\_\_\_

* How do you plan on achieving this goal?
* Insurance Coverage
	+ Liability and Facility Coverage

[ ] Current coverage [ ] No coverage [ ] Planned coverage

Carrier:

Agent:

Policy:

Coverage Type & Level:

* + Crop Insurance Coverage

[ ] Current coverage [ ] No coverage [ ] Planned coverage

Carrier:

Agent:

Policy:

Coverage Type & Level:

Would you be willing to discuss crop insurance with FCI?

[ ] Yes [ ] No [ ]  N/A

* + Medical/Personal Insurance Coverage

[ ] Current coverage [ ] No coverage [ ] Planned coverage

Carrier:

Agent:

Policy:

Coverage Type & Level:

* + Life Insurance Coverage

[ ] Current coverage [ ] No coverage [ ] Planned coverage

Carrier:

Agent:

Policy:

Coverage Type & Level:

* Off-Farm Income & Family Living

Do you and/or your spouse work off farm?

 [ ] Yes [ ] No

Describe any non-farm employment:

Job Title Description(s):

Please Select the Appropriate Box:

[ ] Salary [ ] Hourly [ ] Commission [ ] Seasonal

Income Amount $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will continue until:

What are your living expenses?

My total monthly living expenses equal $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*This figure includes (i.e. house payment, vehicles, food, utilities, etc.) A detailed family living cash flow template/example is located at www.farmcreditil.com*

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