

Applicant Name: _____ **Date of Application:** _____

NOTE: If you have any questions relating to information/forms required, please refer to General Loan Application Information Sheet or contact your local NSFLB office.

Required for ALL Loan Applicants:

(✓) please check off

- EFT Form and Void Cheque for Pre-Authorized Debit (see page 5)
- 3 years Income Tax Returns or Financial Statements (please attach)
- Detailed Statement of Net Worth or Financial Statements (see Detailed Statement of Net Worth Form)
- Photocopies of Two Pieces of Government ID (birth certificate, passport, driver's license)

Required for Sole Proprietor, Joint Tenants (Spouses), or Partnerships:

- Applicant Information Summary signed by each applicant (see page 2)

Required for Incorporated Companies:

- Applicant Information Summary signed by Company Officers (see page 2)
- Corporate Information Summary (Shares authorized/issued) (accountant/lawyer prepared or customer prepared)
- Shareholder Information Summary for each shareholder (see Company Shareholder Information Summary)
- Copies of any Shareholder Agreements (please attach)

Purchase of Assets (Land, Buildings, Equipment, Quota, Livestock):

- Signed Agreement of Purchase and Sale, Quotes, or Invoices (please attach)

Construction or Major Renovation Projects:

- Detailed Cost Estimates, Plans / Drawings (please attach)

Refinancing of Loans with Other Creditors:

- Statement of Account/Loan Balances (please attach)
- Information relating to any applicable repayment penalties (please attach)

New Business Venture or Significant Expansion:

- Detailed Business Plan including Income/Expense Projections (see General Loan Application Information Sheet)

Including a cheque for the Service Fee of: _____

(Required for New Client or Repeat Application)

Please return to either:

TRURO Office

Edward F. Lorraine Building
74 Research Dr, Bible Hill, NS B6L 2R2
Ph: (902) 893-6506 Fax: (902) 895-7693
Email: FLBNS@novascotia.ca

KENTVILLE Office

Agricultural Research Centre
32 Main St, Kentville, NS B4N 1J5
Ph: (902) 679-6009 Fax: (902) 679-4997
Email: FLBNS@novascotia.ca

For Office Use Only

| | |
|--|---------------------------------------|
| Name of Assigned Loan Officer _____ | Office _____ |
| Date Application Received _____ | Date of Appraisal or Farm Visit _____ |
| Date All Required Information Received _____ | Loan Number _____ |

SECTION 1 – APPLICANT TYPE

| | | | |
|--|---|---|---|
| Sole Proprietorship <input type="checkbox"/> | Joint Tenancy / Spouses <input type="checkbox"/> (both spouses must complete & sign application) | Partnership <input type="checkbox"/> (all partners must complete & sign application) | Company <input type="checkbox"/> (signing officers must complete & sign application) |
|--|---|---|---|

| | |
|----------------------------|-----------|
| Registered Farm Name & No. | Commodity |
|----------------------------|-----------|

APPLICANT – INFORMATION SUMMARY

| | | | | | | | | |
|--|---------------------------------|-------------------------------------|---|-------------------------|-----------|---|---|--|
| Full Legal Name (Company or Personal) | | | | | | | | |
| Street # / Civic Address | | | | | | | | |
| RR / Mailing Address | | | | | | | | |
| Postal Code | | | | Telephone (home) | | | | |
| Fax number | | | | (work) | | | | |
| email | | | | (cell) | | | | |
| Date of Birth (e.g. Jun-10-68) | M | M | M | D | D | Y | Y | |
| | | | | Social Insurance Number | _ _ _ _ _ | | | |
| Marital Status (please check <input checked="" type="checkbox"/>) | | | | | | | If Common Law or Other, do you have a Registered Domestic Partnership Agreement? Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Married <input type="checkbox"/> | Single <input type="checkbox"/> | Common Law <input type="checkbox"/> | Other (specify): <input type="checkbox"/> | | | | | |

SPOUSE DETAILS

| | | |
|-------|--------|---------|
| First | Second | Surname |
|-------|--------|---------|

The information provided in this application is, to the best of my knowledge, complete, true, and correct. The applicant consents to having Nova Scotia Farm Loan Board (NSFLB) make any inquiries of persons, firms or corporations as it deems necessary in order to reach a decision on this application. The applicant will provide all information required by NSFLB to complete assessment of this application. The applicant will instruct its lender/financial institutions to provide NSFLB with full information concerning my/our operations and financial position upon request.

During the period of time I/we have financial arrangements with the Nova Scotia Farm Loan Board, I/we provide irrevocable consent as follows:

I/we authorize NSFLB to discuss fully my/our affairs with other lenders/financial institutions, and obtain credit information as necessary.

I/we authorize the exchange of information relating to property insurance, quota, and production to the NSFLB from any agency or commodity board, insurance broker or agent.

I/we authorize the exchange of information between my/our solicitor, accounting firm, and municipalities (to confirm property tax obligations) and NSFLB.

I/we understand that all information on the NSFLB loan will be subject to the disclosure and protection of privacy as per the Nova Scotia Freedom of Information and Protection of Privacy Act.

Date: _____

Signed: _____

Print Name: _____

APPLICANT 2 – INFORMATION SUMMARY

| | | | | | | | |
|--|------------------------------------|--|--|---|-----------|----------------------------|--|
| Full Legal Name (Company or Person) | | | | | | | |
| Street # / Civic Address | | | | | | | |
| RR / Mailing Address | | | | | | | |
| Postal Code | | | | | Telephone | (home) | |
| Fax number | | | | | | (work) | |
| email | | | | | | | (cell) |
| Date of Birth (e.g. Jun-10-68) | M | M | M | D | D | Y | Y |
| | | | | | | Social Insurance Number | _____ |
| Marital Status (please check ✓) | | | | | | | If Common Law or Other, do you have a Registered Domestic Partnership Agreement? Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Married <input type="checkbox"/> | Single <input type="checkbox"/> | Common Law <input type="checkbox"/> | Other (specify): <input type="checkbox"/> | | | | |
| SPOUSE DETAILS | | | | | | | |
| First | | | Second | | | Surname | |

The information provided in this application is, to the best of my knowledge, complete, true, and correct. The applicant consents to having Nova Scotia Farm Loan Board (NSFLB) make any inquiries of persons, firms or corporations as it deems necessary in order to reach a decision on this application. The applicant will provide all information required by NSFLB to complete assessment of this application. The applicant will instruct its lender/financial institutions to provide NSFLB with full information concerning my/our operations and financial position upon request.

During the period of time I/we have financial arrangements with the Nova Scotia Farm Loan Board, I/we provide irrevocable consent as follows:

I/we authorize NSFLB to discuss fully my/our affairs with other lenders/financial institutions, and obtain credit information as necessary.

I/we authorize the exchange of information relating to property insurance, quota, and production to the NSFLB from any agency or commodity board, insurance broker or agent.

I/we authorize the exchange of information between my/our solicitor, accounting firm, and municipalities (to confirm property tax obligations) and NSFLB.

I/we understand that all information on the NSFLB loan will be subject to the disclosure and protection of privacy as per the Nova Scotia Freedom of Information and Protection of Privacy Act.

Date: _____

Signed: _____

Print Name: _____

NOTE: Each applicant/partner must complete and sign a separate Applicant Information Summary.
Please print off extra pages as required.

PURPOSE OF LOAN REQUEST

Describe in detail the purpose/s for which the loan is required.
 Attach an additional page if required to develop the loan proposal and itemize individual costs.

| | | |
|--|----|--|
| | \$ | |
| | \$ | |
| | \$ | |
| | \$ | |
| Total Loan Applied For | \$ | Total Project Cost \$ |
| Service Fee | \$ | Downpayment \$ |
| (New clients to include cheque for Service Fee, with application) Service Fee Calculation: New Loans = 0.25% of the loan balance with a minimum fee of \$400 and a maximum fee of \$2,000 for loans under \$5 million. A fee of \$3,000 applies to loans above \$5 million. Refinance Applications = 0.125% of the loan balance to a maximum fee of \$250. | | Source of Downpayment <div style="text-align: right;">(please check ✓)</div> I/We are responsible to pay all legal fees associated with this loan directly to my/our solicitor <input type="checkbox"/> Legal fees have been included in the amount stated above related to the "Total Loan Applied For" <input type="checkbox"/> |

LOAN REPAYMENT

Loans Officer will discuss current rate and available amortization options with you. The approved choice will be documented via a Commitment Letter and Credit Agreement which will detail the terms, conditions, security for the loan. Please indicate preferences below, if any:

| | | | |
|---|--|--|--|
| Amortization Period _____ Years | Interest Term <input type="checkbox"/> 3 Year Fixed <input type="checkbox"/> 5 Year Fixed <input type="checkbox"/> 10 Year Fixed <input type="checkbox"/> Full Amortization | Payment Method <input type="checkbox"/> Pre-authorized <input type="checkbox"/> Dairy Check Off | Payment Schedule <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annually <input type="checkbox"/> Annually <input type="checkbox"/> Bi-weekly |
| Solicitor Name | | Telephone Number | |
| Property Insurance Company | | Telephone Number | |

| | | |
|--|---|-----------------------------|
| Do you have an up-to-date Environmental Farm Plan? | <input type="checkbox"/> Yes Date: _____ | <input type="checkbox"/> No |
| Do you have an up-to-date Nutrient Management Plan | <input type="checkbox"/> Yes Date: _____ | <input type="checkbox"/> No |

Life Insurance Coverage
 Please complete the **NSFLB Creditor Group Life Insurance Application Form**, or alternatively, provide details of **Private Coverage** to be assigned to the Board (copies of insurance policies).

Authorization for Electronic Funds Transfer (EFT)

Use this form to:

- Start direct deposit payments to my account
- Start deduction of payments directly from my account in amounts specified in my loan agreement and/or payment schedule plus arrears interest if necessary.



- Change information previously submitted

Effective Date: YYYY MM DD

Contact Information

Current loan number(s), if applicable:

Name:

Address:

Email: Phone:

Contact Person: Title:

Confirmation of Deposit (only available for payments from the Board to you)

By providing us with your e-mail address you will receive confirmation of deposit to your account.

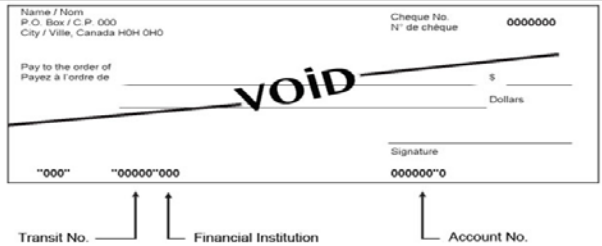
E-mail address for confirmation of deposit:

OR I do not wish to receive confirmation

Bank Account Information

Please attach a blank cheque with your bank information. Write void across the front.

Type of Account: Chequing Savings



For accounts without cheques: Please have your bank complete the following:

Type of Account: Chequing Savings

Name of Account Holder:

Financial Institution Name:

Branch Address:

Transit No. Institution No. Account No.

Teller Stamp:

These instructions are effective until written notice to the contrary is given to your Loan Officer. This authorization/agreement may be cancelled at any time with notice being provided by any one of the undersigned, either in writing or orally with proper authorization to verify the identity of the person, within two weeks before the next payment date.

Authorized signature(s)

Print Name(s)

Date Customer #: 9

Fax, mail or email completed form and void cheque to:

Nova Scotia Loan Board Accounting
 74 Research Drive, Bible Hill, NS B6L 2R2
 Phone: 902-893-6029 Fax: 902-895-7693
 Email: FLBNS@novascotia.ca