CCC-185 U.S. DEPARTMENT OF AGRICULTURE				FOR COUNTY USE ONLY							
(08-20-01) Commodity Credit Corporation					1. LOAN IDENTIFICATION NUMBER						
LOAN APPLICATION AND APPROVAL FOR FARM STORAGE AND DRYING EQUIPMENT LOAN PROGRAM					e Code	B. County	y Code	C. Loan I	No.		
Privacy Act and Public Burden Statemer 2A. Name and Address of Loan Applicar				2B. Tax	dentification	<u>l</u> on Numbei	•				
	,										
				2C. Tel	ephone Nun	nber (<i>Inclu</i>	ıding Area Co	de)			
				3. Red	quested Loar	n Amount					
4. Purpose of Loan (For example, loan to	o purchase, construct, en	ect, install o	r remodel the	e farm ste	orage facility	<i>(.</i>)					
5. Facility Equipment described in Item 4	I needed for the storage,	drying, or h	andling of the	estimat	ed production	on of the lis	sted commodi	ities on the	farm.		
A. Farm Number	B Commodities	C.			D. Yield Per Acre		E. Total Production for Ea Commodity (Item 5C times Item 5D = It		У		
				Х		=	(Rem 50 tin	nes nem oi	<u> </u>		
				Х		=					
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	G T	otal Estimate	F. 10t ed Production		ction from Ite						
	G. 10	Ulai Estimate	eu Fioductioi		. Existing Ca						
			I. A		Capacity N						
	J. Capacity	of Proposed	d Storage Str								
			oration Indica								
Date Facility Equipment Purchased or Purchase Date (MM-DD-YYYY)	Tentative	7. Name of	Company W	/here Fa	cility Equipm	nent Was F	Purchased				
Date Facility Equipment Erected or Installed Or Tentative Date to Erect or Install (MM-DD-YYYY) Property 19			Company T	That Erected or Installed the Facility Equipment							
10. Date Facility Equipment Was/will Be Delivered to the Farm (MM-DD-YYYY)			11. Location of Real Estate on Which Facility Equipment Was/will Be Erected or Installed								
12A. Name of Owner of Real Estate in It	em 11 (If Other than App	llicant)		nformati Real Esta		^f Person H	laving a Lien o	or Interest i	in .		
13. APPLICANT'S CERTIFICATION	N										
The Applicant certifies that the statemer made in good faith to obtain a loan. Sec loan applications.											
Are you or any co-applicant delinquent of	n any federal non tax del	ot? (If YES,	provide deta	ils in the	remarks)		YES	3	☐ NO		
A. Signature of Applicant					B. Date of Application (MM-DD-YYYY)						
C. Signature of Co-applicant					D. Date of	Application	n <i>(MM-DD</i> -YYY	Y)			

nrangriy nas noon ororioa ar inci	talled and inspected and approved in acco	9.	•	mmittee. Loan funds will not be disbursed unt			
. Loan Amount Approved	B. Number of Loan Installments	C. Final Loan Approval Date (MM-DD-YYYY)		D. Date CCC Contacted Loan Applicant			
By CCC Pending Funding		Date (MINI-DD-1111)		Final Expiration Date (MM-DD-YYYY)			
5. Signature of CCC Representation		Date (MM-DD-YYYY)					
6A. FSA County Office Name & Ad	ddress (Including ZIP Code.)	17. Security Required that approving lien. Enter side	17. Security Required: When loan approved, enter type of security that approving committee is requiring (UCC or chattel mortgage or 1st lien. Enter size of tract covered by lien, if required).				
SP Talanhana Niverban (Inglishing							
6B. Telephone Number (Including 8. Remarks	area code):						

According to the Paperwork Reduction Act of 1995 an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0204. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions searching existing data sources gathering and maintaining the data needed, and completing and reviewing the collection of information. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**