



**AG INVEST:  
ANNUAL AGRICULTURE LINKED DEPOSIT LOAN PROGRAM  
APPLICATION FOR DEPOSIT  
(lender application)**

The Honorable Michael W. Frerichs  
 Illinois State Treasurer  
 Attn. Time Deposit Section  
 400 West Monroe, Suite 305  
 Springfield, IL 62704  
 Phone: (866)458-7327 Fax: (217)558-3793

**Type of Application:**

- Single Borrower (Indicate Borrower(s) by submitting attachment 1A Form)
- Farm Entity (Indicate Farm Entity Name(s) and eligible Borrower(s) by submitting attachment 1B Form)

Dear Treasurer Frerichs:

The \_\_\_\_\_ (financial institution) of \_\_\_\_\_ (city) herein applies for a deposit in the amount of \$ \_\_\_\_\_ under the Ag Invest: Annual Agriculture Loan Program. If state funds are made available to the financial institution, I hereby certify the following: I will fund the loan(s) listed on Attachment Forms 1A and/or 1B and the loan rate will not exceed the state deposit rate by more than 3.75%. Loan(s) shall not be made to any person(s) who has approval authority over lending transactions at the financial institution. I further certify that the Borrower(s) is at least 18 years of age and for farm entities all Borrower(s) that are liable/signatories at the financial institution must be listed on the Attachment 1-B Form.

The proceeds of each loan will be used only to pay for cost related to the production of (1) conventional farming, (2) transitioning farm, (3) sustainable farming, or (4) value added farming. Cost covered by this program include, but not limited to the following: seed; feed; fertilizer; plants; cash rent; crop insurance; purchase of livestock or breeding stock; production related energy and labor expenses; veterinary fees and/or new and used farm equipment, or costs related to sustainable/value added production such as processing; milling; transitioning; greenhouses; irrigation; hoop houses; and more. **PLEASE SPECIFY THE ABOVE IN THE PRODUCTION TYPE SECTION ON THE ENCLOSED 1A AND/OR 1B FORMS.**

All funds deposited pursuant to this Application for Deposit shall be loaned to the Borrower(s) at the loan rate not to exceed the state Ag Invest annual deposit rate by more than 3.75%. The borrower has the ability to utilize these funds as a line of credit. The financial institution shall be allowed to request a deposit of up to \$400,000 per individual and \$800,000 per farming entity. The Treasurer's Office reserves the right to audit documentation related to this program. Any misuse or non-compliance could result in the withdrawal of funds or further penalties permissible by Illinois Law. The Office of the State Treasurer must receive this Acknowledgement Forms within **30 calendar days** from the date of deposit. Fax copies are accepted.

**The Office of the State Treasurer may withdraw any portion of the deposit for which an Acknowledgement Form has not been received in a timely manner.**

I acknowledge that failure to comply with the commitments made herein may result in early withdrawal of this deposit.

Name of Financial Institution: \_\_\_\_\_

Loan Officer: \_\_\_\_\_ Title \_\_\_\_\_

Email Address \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**SUBSCRIBED and SWORN to before me (Notary signature date should match that of the loan officer signature date)**

(Notary Public Signature) \_\_\_\_\_ This \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

