



Farm Asset Reinvestment Management (FARM) Guarantee

Farmer's Affidavit

LENDER NUMBER _____ LENDER NAME _____

FARMER'S NAME _____

You have applied for a Farm Asset Reinvestment Management ("FARM") guarantee, which, if approved, will be guaranteed, as authorized by the Wisconsin Statutes, by the Wisconsin Housing and Economic Development Authority ("WHEDA"). State law requires that we must determine whether you are eligible to receive a guarantee under FARM, and whether you intend to use the proceeds of the loan for eligible purposes. Consequently, you must confirm the following information in this Affidavit. Read each item carefully. Making a false statement may subject you to criminal penalties (NOTE: If a partnership or corporation, the General Partner or Chief Executive Officer must sign this statements).

I, the Borrower, hereby certify the following:

1. My proposed project debt will be at least 40% but not greater than 85% of the agricultural assets to be acquired, or the improvements to be made with the proceeds of this loan.
2. I intend to be or am currently engaged in a farming operation in Wisconsin.
3. As a startup farmer, I have no less than 3 years of farming experience including managing the day to day operations of a farm.
4. If I am acquiring a farm with a homestead, I intend to operate the farm and have worked at the specific farm being acquired.
5. The loan proceeds will be used to purchase agricultural assets or land for agricultural use, finance the cost of improvements to facilities, or to refinance debt (not to exceed 75% of the guaranteed loan amount).
6. I have filed all necessary tax returns and that there are no past due or pending tax obligations known at the time of application.
7. Prior to submission of this application to WHEDA, no work has commenced with respect to the eligible expenditures described in this application.
8. I am not delinquent in making child support, birthing expense, or maintenance payments.
9. I am not in default on any WHEDA loan.
10. The information presented in this application and the accompanying supporting information is true and accurate to the best of my knowledge. I understand that submitting false or misleading information in connection with this application may result in the undersigned being found ineligible for a guarantee under FARM and may result in the termination of the guarantee.

11. I acknowledge this information is being submitted to WHEDA to assist them in determining whether to provide the Lender with a guarantee on the proposed loan. The undersigned Farmer acknowledges that WHEDA reserves the right to request additional information it deems necessary in making its decision.

The undersigned hereby certifies that the information and statements in this Affidavit are complete and true. The Farmer has received a copy of this document.

If Borrower is a Sole Proprietor, sign here:

_____	_____	_____
Borrower's Signature	Co-Borrower's Signature	Date
_____	_____	
Print Name	Print Name	

If Borrower is a Partnership or Corporation, sign here:

_____	_____	_____
General Partner's or Chief Executive Officer's Signature	Co-Borrower's Signature	Date
_____	_____	
Print Name	Print Name	

**Mail or Fax to:
FARM
WHEDA
PO Box 1728
Madison WI 53701-1728
(608) 267-2440**