

2027 Input Financing Program

P.O. Box 870 • Fremont, OH 43420-0870 • creditall@sunriseco-op.com

Direct Credit Phone: **419-334-5251** • Toll-Free: **800-321-5468**



THIS INFORMATION WILL BE TREATED IN A CONFIDENTIAL MANNER

SELECT YOUR COMMITMENT(S).
EACH OPTION REQUIRES 100% PARTICIPATION TO EARN POINTS.

TOTAL POINTS

- 100%** Crop Protection Products - 2 pts.
(herbicide, insecticide, fungicide, adjuvant)
- 100%** Seed - 1 pt.
- 100%** Grain - 1 pt.
- 100%** Crop Nutrition - 2 pts.
- 100%** Energy 1 pt.
(All oil, power fuels & propane)
- VantagePointe®

**Total points from above
determines your level:**

Level 1 PLUS: 7 pts. • 0% Rate (Due August 31, 2028)

Level 1: 7 pts. • 0% Rate (Due April 30, 2028)

Level 2: 6 pts. • 2% Under Prime Rate (Due March 31, 2028)

Level 3: 5 pts. • 1% Under Prime Rate (Due February 29, 2028)

Level 4: 4 pts. • Prime Rate (Due December 31, 2027)

Level 5: 1-3 pts. • Prime Rate Plus 2% (Due December 31, 2027)

Please print and completely fill out all information blanks so we may properly process your request

Account Name: _____

Individual

Name: _____ Account # _____

Incorporated

Spouse Name (if applicable) _____

Partnership

Address: _____

LLC

City: _____ State: _____ Zip Code: _____

Married

Phone: _____ Cell Phone: _____ County: _____

Single

Social Security No.: _____ Birthdate: _____

Spouse/Cosigner Social Security No.: _____ Birthdate: _____

Federal I.D. No.: _____ Email: _____ Fax: _____

Applicant's Signature: _____ Date: _____

Spouse/Cosigner Signature: _____ Date: _____

Co-Applicant Signature: _____ Date: _____

Co-Applicant Signature: _____ Date: _____

Co-Applicant Signature: _____ Date: _____

If a partnership, LLC or corporation, please give name, social security number and address of other owner(s):

Co-Applicant(s):

Co-Applicant(s):

Co-Applicant(s):

NAME: _____

NAME: _____

NAME: _____

TITLE: _____

TITLE: _____

TITLE: _____

ADDRESS: _____

ADDRESS: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

CITY, STATE, ZIP: _____

CITY, STATE, ZIP: _____

SOCIAL SECURITY NO.: _____

SOCIAL SECURITY NO.: _____

SOCIAL SECURITY NO.: _____

BIRTHDATE: _____

BIRTHDATE: _____

BIRTHDATE: _____

We are making this application and statement for the purpose of securing credit on account, and we represent that the information given herein is true and accurate. We authorize both financial institutions and suppliers to release any financial and credit information known to them for the purpose of evaluating this application for credit. We agree to pay according to the terms of each account, and request the billings be made in the account name specified. By the signature(s) above, I/we agree to be bound by the Dealer's credit terms, and acknowledge receipt of a copy of the credit terms.

Anticipated Credit Needed \$ _____ Acres Owned _____ Acres Rented _____

How many years have you been farming? _____ Previous year's farm income (2025 Schedule F, line 9) \$ _____

Non-farm income \$ _____ **Agronomy Solutions Advisor** _____

CROP PLANNING INFORMATION

Crop	Acres	Estimated Yield	Total Production	(Less) Prod. Used for Feed	(Less) Landlord's Share	Net Production	Insurance Coverage		Expected Price	Total Crop Value
							MPCI, CRC, etc.	Type %		
									Total Crop Value	

FINANCIAL INFORMATION 2026

Please attach the first 2 pages of your 2025 1040 federal income tax return and a copy of your Schedule F and Schedule 1. If applicable please send your 1065 or 1120. If a partnership or corporation, all co-applicants tax returns and balance sheets must be provided.

There will be a \$250 application fee if completed application and all corresponding documents are not received by August 31, 2026.

Projected Income Statement: Crop Sales (See Crop Planning Information Above)	
Plus: Livestock Sales	+
# Head _____ Average Price Per Pound _____ Total: _____	
Avg. Wt. _____ Est. Sales Date(s) _____	
Plus: Government Program Payments	+
Plus: Other Farm Income	+
Equals Subtotal: Gross Farm Income	=

BALANCE SHEET

Assets (What I Own) (Itemize on Schedule)		Liabilities (What I Owe) (Itemize on Schedule)	
1. Cash, Checking, & Savings Accounts	\$ _____	1. Sunrise Cooperative Financing 2025/2026	\$ _____
2. Notes Receivable	_____	2. Accounts Payable	_____
3. Livestock & Poultry	_____	3. Credit Cards	_____
4. Crops (Growing)	_____	4. Operation Loans to Financial Institutions	_____
5. Crops (Stored)	_____	5. Other Current Debt	_____
6. Other Current Assets	_____	6. Other Current Debt	_____
Total Current Assets	\$ _____	Total Current Liabilities	\$ _____
7. Real Property (_____ Acres @ \$_____/Acre)	\$ _____	7. Machinery Loans	\$ _____
8. Home & Buildings	_____	8. Vehicle Loans	_____
9. Motor Vehicles	_____	9. Real Estate Mortgage Loans	_____
10. Machinery & Equipment	_____	10. Other Long Term Debt	_____
12. Government Securities, Stocks, Bonds, & other Securities	_____	Total Long Term Liabilities	\$ _____
11. Other Long Term Assets	_____	Total Liabilities	\$ _____
Total Long Term Assets	\$ _____	Net Worth (Total Assets Less Total Liabilities)	\$ _____
Total Assets	\$ _____		