



TRUSTEE ENDORSEMENT REQUEST FOR KIVA BORROWERS

This form can be filled out on the computer and then saved and emailed or printed. Please respond completely to the following questions.

(1) Applicant's name(s) _____

(2) Mailing Address: _____

City: _____ State: ____ Zip: _____

(3) Physical Address (if different from mailing address):

City: _____ State: ____ Zip: _____

(4) How can we contact you? Email address: _____

Home Phone Number: _____

Business Phone: _____

Cell Phone: _____

(5) Business name: _____

(6) Business physical address (if different from above):

City: _____ State: ____ Zip: _____

(7) Years you have been operating this farm or farm-related business): _____

(8) In one or two sentences, please describe your business:

(9) Do you have a website? yes no

If yes, what is the address?

(10) Is your operation is currently certified organic? yes no both

____ In transition. Explain:

If yes, indicate who your certifier is: _____

and the year you were first certified: _____.

(11) If you are not certified organic and are a farm, please explain briefly how you manage soil fertility and crop nutrients and prevent soil erosion and contamination of crops, soil, and water. Be sure to describe your strategies for managing pests, weeds, and disease (for crops). If you have livestock, describe how your preventative health care practices, what diseases you most frequently encounter, and how you treat these.

(12) If you are not certified organic and your business' primary purpose is to process, add value to, store, or act as distributor, please describe how your business supports the environmental, economic, and social goals of sustainable agriculture.

(13) If you farm, how many productive acres do you actively farm? _____ acres

Of these, how many do you own? _____ acres Lease? _____ acres

If a lease, what is the lease term? _____

If this is a non-farm business, please explain your physical base of operations (number buildings, leased or owned, etc.)

- (14) Your number of years' experience in the business, years in the current situation, and previous business experience, if any:
- (15) Is your business a sole proprietorship, a partnership, LLC, S-Corp, C-Corp, or other?
- (16) What are your primary markets or customers and how long have you been working with them?
- (17) Approximate off-farm or other household income (income from spouse, rental income, additional employment): List amount and source(s):
- (18) Number of employees or interns during the last 12 months: Part-time ___ Full-time ___
Of part-time employees, how many are: Permanent ___; Temporary or seasonal: ___
Of full-time employees, how many are: Permanent ___; Temporary or seasonal: ___
- (19) Purpose of loan you want to request (no more than 1-3 sentences):
- (20) Amount: \$ _____ (maximum: \$10,000 for farmers; \$5,000 all others)
- (21) How long do you think you'll need to repay the funds?
- (22) How would the requested funds help you maintain or increase productivity and financial viability, or decrease your ecological footprint?
- (23) List any other lenders or investors that you have approached for the same financing or are approaching for other financing. Please specify the amount requested from them:

OEFFA Kiva Trustee Endorsement Application

(24) Has another lender or investor turned down a similar application? Yes No
If yes, what lenders/investors?

Reason(s) for loan denial?

(25) What are your total assets? Please list items and approximate value.

- Home Value: \$
- Land Value: \$
- Farm Equipment and Tools: \$
- Farm and Personal Vehicles: \$
- Other: \$

(26) Are any assets being used as collateral for another loan or other liabilities? Yes No
If yes, explain:

(27) Do you have a business plan Yes No
If yes, how or with whom was it prepared?

(28) Have you or any of your businesses ever declared bankruptcy? Yes No
Have you ever had loan or credit card accounts with serious delinquency, charge off or sent to a collection agency? Yes No

If you answered yes to either question, please explain:

(29) Have you ever been convicted of a felony? Yes No
If yes, please describe, including dates (please note that previous criminal record will not automatically disqualify applicant – total circumstances will be evaluated).

- (30) List 3 people we may contact as personal references and indicate your relationship to them. (Note that the committee values highly references from other OEFFA members.) Please tell us the best way to contact them.

I affirm that all statements made in this application are true and correct to the best of my knowledge,

Signature

Print Name

Date

Submit this application as an e-mail attachment to kivatrustee@oeffa.org or by mail to: Kiva Trustee at OEFFA, 41 Croswell Rd., Columbus, OH 43214. Questions? Call Carol Goland, Executive Director: 614.421-2022 x202

If we are able to endorse you, we will notify you and Kiva.