

CREDIT AUTHORIZATION / VERIFICATION FORM
ZIONS AG FINANCE

Applicant(s) has applied for a loan with ZIONS AG FINANCE, 500 Fifth St., Ames, Iowa 50010-6063. Applicant(s) authorizes ZIONS AG FINANCE to conduct a credit inquiry and has listed your organization as a reference. Please furnish the requested information and forward this request in the enclosed envelope. Applicant(s) authorize ZIONS AG FINANCE to conduct their own credit investigation including a request for a business or consumer credit report.

_____	_____	_____
Date	Applicant's Signature	Applicant's Signature
To: _____	_____	For: _____
Credit Reference		Applicant
_____	_____	_____
Address		Address
_____	_____	_____
City-State-Zip		City-State-Zip

LOAN INFORMATION

TYPE OF CREDIT	Current Balance	Interest Rate	Payment Terms		Date Last Paid	Final Due Date	Original Loan Amount	Original Loan Date
			Amount	Frequency				
REAL ESTATE	\$		\$				\$	
CHATTEL								
OPEN NOTE								

Number of delinquent payments _____ Amount overdue \$ _____

Years of experience with your organization _____ Maximum credit extended at one time \$ _____

Do you have any co-signors or guarantors on the above loans? _____

Do you have any knowledge of bankruptcy, foreclosure or compromised debt involving the applicant? _____

Have you imposed any restrictions on future transactions with the applicant? _____ Explain "yes" response _____

PAYMENT HISTORY

PROMPT

SATISFACTORY

LESS THAN SATISFACTORY

SLOW

CASH ACCOUNTS

TYPE OF ACCOUNT	BALANCE

Additional comments: _____

_____ Signature _____ Telephone _____ Date