DNR Lease to Beginning Farmer Program
2014 IADD Certification

DEADLINE: DECEMBER 1, 2014

Name of Beginning Farmer _____ Date of Birth _____
Name of Spouse _____ Date of Birth _____
Address: _____ Telephone (_____)_____
City _____ State _____ Zip _____ E-mail:_____

CERTIFICATIONS OF BEGINNING FARMER

(To be completed by beginning farmer/s)

In submitting this request, I, the undersigned Beginning Farmer, have read the following statements and hereby certify and agree that:

1. I will be a permanent resident of the state of Iowa at the time of lease. ☐ True ☐ False
2. My net worth is below the maximum allowable net worth. For calendar year 2014 = $678,731. ☐ True ☐ False
   Attach a current financial statement taken within 30 days of submission of the certification, witnessed by a bank officer and signed by all applicants (the applicant's spouse must be included on the financial statement).
   ***If the applicant, applicant's spouse and/or minor children is involved in a business, partnership, limited liability company, or corporation, either related or unrelated to the applicant's farming operation, a financial statement from this entity must also be submitted with the application.**
3. I have sufficient education, training or experience in the type of farming for which this lease is requested. ☐ True ☐ False
   Attach a background letter describing the education, training or experience of you and your spouse as it relates to farming.
4. The Project shall be used only for farming by myself, my spouse, and/or minor children, and we will perform the labor and provide the management needed to use the Project for farming. ☐ True ☐ False
5. I have or will have access to adequate working capital, farm equipment, machinery or livestock. ☐ True ☐ False

Include the following with your certification request or <u>it will be returned as incomplete</u>:
☐ **IADD Certification Form (this form)**
☐ **Financial Statement of Beginning Farmer and spouse – signed and witnessed by bank officer (within approx. 30 days)**
☐ **Financial Statement of Business if applicable (within approx. 30 days)**
☐ **Background Letter from Beginning Farmer including the information described above in #3**

When Certification and all supporting documents are complete return via mail, email or fax to:
IOWA FINANCE AUTHORITY Email: IADD@iowa.gov
2015 Grand Avenue | Des Moines, Iowa 50312 Fax: 515.725.4901

All of the information I have provided on this certification is true and complete. Also, I understand this certification and any of the documents prepared or submitted in connection with it are "public records" as defined in Section 22.1 of the *Iowa Code* and are subject to examination, copying, publication or other dissemination by any person.

_____	_____	_____
Date	Printed Name of Beginning Farmer	Signature of Beginning Farmer
	_____	_____
	Printed Name of Spouse	Signature of Spouse

(Date Received by IADD)

IOWA AGRICULTURAL DEVELOPMENT DIVISION

INITIAL REVIEW:
Reviewed by initials:_____
Date Reviewed:_____
☐ **<u>DOES</u>** meet ☐ **<u>DOES NOT</u>** meet

OFFICE USE ONLY

CERTIFICATION OF BEGINNING FARMER

I am making my certification in accordance with the qualifications of a beginning farmer as defined in Iowa Code 175.12.
I certify that I have reviewed the above Beginning Farmer and information and hereby certify that he/she:

☐ **<u>DOES</u>** meet the requirements of a Beginning Farmer ☐ **<u>DOES NOT</u>** meet the requirements of a Beginning Farmer

Beginning Farmer Certification will be returned via email to DNR and the above Beginning Farmer when completed.

_____	_____	_____
Date	Printed Name of IADD Agent	Signature of IADD Agent
<u>THIS CERTIFICATION WILL EXPIRE ON SEPTEMBER 1, 2015</u>	_____	_____
	Phone	Email Address

AGRICULTURAL FINANCIAL STATEMENT

ENTITY:				Check One	
				Individual	☐
				Partnership	☐
NAME(S):				Corporation	☐
				Limited Liability Company	☐
ADDRESS:					
	Street	Town	County	State	Zip Code
BANK:					
	Bank	Address			Statement Dated:

I or We furnish the following statement of my of financial condition on the above given date and is certified to be true and correct.

CURRENT ASSETS		CURRENT LIABILTIES	
Cash in Hand and in Bank (checking)		To Whom and Collateral	Due Within 12 Months
Savings & Certificates (Sch.A)		Notes Due This Bank & Others	
Crops and Feed on Hand (Sch. G)			
Livestock Held for Sale (Sch. E)			
Marketable Bonds & Stock (Sch. D)			
Accounts Receivable			
Note and Contracts Receivable			
Cash Invested in Crop		Accounts Payable (Gas, Feed)	
CCC or Government Payments			
Other Current Assets			
		Cash Rent Due	
		Other Current Liabilities	
		Interest Accrued	
		Credit Card Balance	
		Taxes – Federal, State, & Real Estate	
TOTAL CURRENT ASSETS		TOTAL CURRENT LIABILITIES	
NET CURRENT POSITION (W. Cap.)		CA:CL RATIO	
INTERMEDIATE ASSETS		**INTERMEDIATE LIABILITIES**	
Cash Value Life Insurance (Sch. C)		To Whom and Collateral	Due Beyond 12 Months
Machinery & Equipment (Sch. H)		Machinery Loans (not Incl. Above)	
Breeding Stock (Sch. F)		Breeding Stock Loans	
Securities Not Readily Mlble.		Term Debt - More Than 1 Year	
Autos		Other Intermediate Liabilities	
Retirement Accts./Pension Plans (Sch. B)			
Other Intermediate Assets			
TOTAL INTERMEDIATE ASSETS		TOTAL INTERMEDIATE LIABILITIES	
NET INTERMEDIATE POSITION		IA:IL RATIO	
LONG TERM OR FIXED ASSETS		**LONG TERM LIABILITIES**	
Farm Real Estate			Not Included Above
City Real Estate		Balance Due on Mortgages	
Other Real Estate		Balance Due on Contracts	
Capital Improvements		To Whom / Annual Pymt. / %age rate	
Mortgages or Contracts Held			
		TOTAL LONG TERM LIABILITIES	
TOTAL FIXED ASSETS		FA:LTL RATIO	
NET FIXED POSITION		TL/TA	
		TOTAL LIABILITIES	
DEBT: WORTH RATIO		PRESENT NET WORTH	
TOTAL ASSETS		TOTAL LIABILITIES & NET WORTH	

I or We further certify that all the blanks contained in the foregoing statement were completed before I or We signed by inserting information furnished by the undersigned. I or we acknowledge receipt of this instrument.

Date:_____ Signed:_____

Witness:_____ Signed:_____

Schedule A - Savings & Certificates

Type of Account	Location	Value
	Total	

Schedule B – Retirement Accounts & Pension Plans

Type	Location	Value
	Total	

Schedule C – Life Insurance

Insurance Co.	Beneficiary	Face Value	Cash Value	Amt. Borrowed
	Total			

Schedule D – Bonds & Securities

Par Value Bonds	No. of Shares or Description	Market Value
	Total	

Schedule E & F - Livestock Held for Sale

Number	Description	Weight	Price	Value
		Total		

Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. Alimony, child support, separate maintenance received under: (circle one)
Court order written agreement oral understanding

Date of Birth: _____
Physical Condition: _____
Dependents: _____ Boys _____ Girls
At Home: _____ In College: _____
Involved in Bankruptcy? ☐Yes ☐ No
Any Suits Pending? ☐Yes ☐ No
Other Jobs or Business interests_____
_____
TOTAL INCOME $_____
Contingent Liabilities:_____
Health Insurance ☐Yes ☐ No
Deductible Amount $_____
Disability Insurance ☐Yes No
Crop Insurance & Type Hail Multi-Peril
Farm Blanket Insurance ☐Yes ☐ No $_____
Liability Insurance Limits ☐Yes ☐ No $_____
Umbrella Policy ☐Yes ☐ No $_____
Do You Have a Will? ☐Yes ☐ No

Schedule G – Crops or Feed on Hand or Growing (your share only)

Crops or Feed	On Hand Bu. Or Tons	Dollars Per Unit	Total Value	Crop	Number of Acres
				Corn	
				Beans	
				Oats	
				Hay	
				Set-Aside	
				Pasture	
			Totals	Total	

Schedule H - Machinery and Equipment

Number	Kind	Make	Model/Desc	Year	Value
	Auger				
	Baler				
	Chisel Plow				
	Corn Head				
	Grain Head				
	Corn Picker				
	Cultivator				
	Disc				
	Drill				
	Elevator				
	Field Cult.				
	Forage Har.				
	Grain Cart				
	Grain Dryer				
	Grinder				
	Harrow				
	HogFeeders				
	Lvstk Trailer				
	Loader				
	Manure Spr				
	Mower				
	Planter				
	Plow				
	Skid Loader				
	Tools				
	Tractors				
	Trucks				
	Wagons				
	Windrower				
	Other(List)				
				Total Value	

Schedule I - Real Estate: Include Farm, City & Other Real Estate, Mortgages, Contracts & Grain Equipment. (Fill in 1, 2, 3 & 4 if rented or custom Farmed)

1. Name of Property:					
2. Acres:					
3. Description:	Legal				
	Section/Lot				
	Twp./Add'n				
4. Type of Lease OR					
5. Name(s) on Title					
6. Type of Ownership					
7. Year Purchased					
8. Present Market Value					
9. Mortgage or Contract					
Total Balance Due					

Sample letter from the Beginning Farmer

Dear IADD:

I am requesting to be certified as a Beginning Farmer for the DNR Lease to Beginning Farmer Program.

Since growing up on a small farm south of Oxley, I have been interested in helping on my family's farm and assisted with all farm chores. In the spring of 2000, I purchased 30 acres of land in Brown County and have also been cash renting land in this vicinity. I feel the addition of this 120 acre parcel, which adjoins the 30 acres I presently own, will help expand my operation into a successful farm business.

As a high school student, I was involved in our local FFA chapter and was also a 4-H member. After high school, I attended Central City Community College and enrolled in the Agri-Business Technology Program. There I had hands-on learning about livestock, crop, and marketing strategies.

My father and I have an agreement that as long as I contribute my labor to his farming operation, I can use his machinery on my acres. This is allowing me to get into farming without huge machinery debt.

My local banker is very supportive of young farmers. I have had several operating loans through this bank in years past.

I would appreciate your consideration of this request.

Sincerely,

John Z. Farmer
Mary Z. Farmer