

SAFETY 24 Loan Program

Hurricane Helene Loss Loan Application Georgia Development Authority



1890 Hwv 138. Monroe. GA 30655 *Phone*: 770 207 4250 *Fax*: 770 207 4257 anita@gdaonline.com

100		0000 1 110110: 11 0 201 4200			
	APPI	LICANT	CO	-APPLICANT	
General Information	Full Name		Full Name		
	Current Street Address and/or PO Box		Current Street Address and/or PO Box		
	City State Zip	Code County of Residence	City State	Zip Code County of Residence	
	Social Security # Birt	hdate Home Telephone	Social Security #	Birthdate Home Telephone	
	Mobile Telephone E-N	Mail Address	Mobile Telephone E-Mail Address		
	Number of Years Farming	Full Time Part Time	Number of Years Farming	Full Time Part Time	
	Have you filed bankruptcy within		Have you filed bankruptcy v		
	Are there outstanding judgemen		Are there outstanding judge		
	<u> </u>		3, 5	, , = =	
Income & Financial	Gross Annual Wages or Salary I	ncome \$	Gross Annual Wages or Sa	lary Income \$	
	Gross Annual Farm Income \$		Gross Annual Farm Income \$		
	Primary Source of Farm Income (Major Ag product produced)		Primary Source of Farm Income (Major Ag product produced)		
Information	Other Income: (Ann/Mo) \$		Other Income: (Ann/Mo) \$		
	DDA Bal./Cash on Hand \$		DDA Bal./Cash on Hand \$		
	Total Assets \$	Total Liabilities \$	Total Assets \$ Total Liabilities \$		
	Acres to be Pledged		Owner's Name		
Collateral Available to Pledge	Tax Assesor's Current Value	Prior Liens on Property	Location of Property: Curre	nt Street Address	
	Parcel Number		City State	Zip Code County	
Off Farm Job Information	Cur. Employer		Cur. Employer		
	Work Telephone Job Title	Years With This Employer	Work Telephone Job	Title Years With This Employer	
	Loss Contributed to Hurricane	Damage (crop, acres, yield /acre	, etc.) PROVIDE VERIFICA	TION AMOUNT	
Hurricane				\$	
Loss Loan				\$	
Request				\$	
Noquosi				\$	
			Tota	al Loan Request \$	
Contact Information for Crop Insurance Agent & Primany	Name of Crop Insurance Agent		Name of Primary Lender Pr	roviding Operating Funds	
	Name of Crop Insurance Compa	ny	Name of Lending Institution	1	
	Current Street Address and/or P	О Вох	Current Street Address and/or PO Box		
	City State	Zip Code	City State	Zip Code	

Lender						
	Mobile Phone No.	Office Phone No.	E-Mail Address	Mobile Phone No.	Office Phone No.	E-Mail Address
Contact Information for Closing Attorney	Name of Your Attorney			Can you continue oper	ating without this loan?	
				Yes () No	()	
	Name of Law Firm			Will you allow assignm	ent of loan proceeds to	another creditor?
				Yes () No	()	
	Current Street Address	and/or PO Box				
	City State	e Zip Code				
	Mobile Phone No.	Office Phone No.	E-Mail Address			
Applicant(s)/Borrower(s) by signing this Application hereby acknowledges that it is understood that the making of a false statement or report in						

Applicant(s)/Borrower(s) by signing this Application hereby acknowledges that it is understood that the making of a false statement or report in connection with this application or any other information provided to the GDA/Lender to induce the GDA to make loan(s) or advances(s); or the failure to remit collateral proceeds to the GDA subsequent to the making of loan(s) or advances(s) hereunder may be a violation of state and/or federal law for which I(we) could be prosecuted. It is agreed that the provisions shown below, are incorporated herein by reference and made a part hereof, and further agreed that any loan(s) or advance(s) will be used for eligible purposes. I understand that the law requires that I promptly pay on the loan as received all proceeds of sale of property securing the loan. I (we) grant the GDA permission to obtain a credit report on me in connection with this transaction for all legitimate purposes. I (we) also grant permission to those creditors to provide all information requested by the GDA. I (we) also certify that the foregoing reported losses contributed to damage from Hurricane Helene are correct and may be verified by my crop insurance agent or by other means acceptable to the GDA. I (we) also grant permission to the listed crop insurance agent to provide information requested by the GDA.

Date	Applicant	Co-Applicant

- 1. I am 1) an individual who is a legal resident and citizen of the State of Georgia or 2) a legal entitiy established pursant to the laws of the United States of America and registered with the State of Georgia whose principal partners, members, stockholders or owners are legal residents of the State of Georgia.
- 2. The farming operation maintains a place of business in the State of Georgia and was established prior to September 27,2024 and all losses considered for a loan were incurred within the designated hurricane disaster area.
- 3. Promissory notes or other documentation evidencing Applicant's indebtedness, and such security instruments as required, will be prepared in accordance with the respective requirements of the GDA, acting in accordance with policies and interest programs now or hereafter established.
- 4. The information contained in this application is furnished to induce the GDA to make any loan applied for hereafter. Should any information provided herein or in connection with any loan application be knowingly false, such act shall constitute a default under all loans then outstanding to Borrower.
- 5. This application shall be deemed a part of all instruments executed as security for the indebtedness of Borrower(s) to the GDA. Time shall be of the essence of all obligations of Borrower(s) to the GDA. No waiver by the GDA of any of the terms of any such instruments or of this application or of any loan application or of any obligation of Borrower(s) to the GDA, or any violation thereof, shall be construed as a waiver of any similar act or acts, or omission, at any subsequent time.
- 6. Borrower(s) agrees to provide current financial statements in a form acceptable to the GDA as may be requested by the GDA, from time to time, while any indebtedness from Borrower(s) to the GDA is outstanding.
- 7. All loans or advances applied for hereafter and granted by the GDA shall be secured by all documents pledging collateral executed by Borrower(s) to the GDA, and the provisions herein shall apply to any loan or advance hereafter made.
- 8. All of Borrower's obligations under any loan contract with the GDA shall extend to and be binding upon Borrower's heirs, executors, administrators, successors, and assigns, and all rights, power, privileges and remedies conferred upon and given to the GDA herein or in any other instrument executed by Borrower shall extend to and may be exercised and enjoyed by the GDA's successors and assigns and by the holder of any note evidencing any part of the loan(s) or advance(s) now or hereafter applied for.

CERTIFICATION CONCERNING TAXPAYER IDENTIFICATION NUMBER: Under penalties of perjury, I certify that:

The number shown on this form is my correct taxpayer identification number (or I am waiting for one to be issued to me).

NOTICE: The GDA is a State instrumentality and, as such, your relationship with it is subject to State laws as well as Federal laws, including Federal criminal statutes. Your Application with the GDA provides that all proceeds from disposition of property used as collateral for your loan must be applied to and for repayment of debt(s) secured by the property. Any disposition of property (collateral) which is not provided for as a part of your loan relationship and which does not have prior approval of the GDA is a breach of the loan arrangement.

Similarly, as false statements, which are given to the GDA in an effort to influence actions of the GDA are a breach of the loan arrangement and may also be a prohibited act under State and Federal criminal statutes. If you intend to dispose of any property which is collateral for your loan with the GDA that is not in accordance with the provisions of your loan arrangement, you must contact your loan representative to obtain prior approval for the desired disposition.

NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discrimination against credit applicants on the basis of color, relgion, national origni, sex, marital status, or age (providing that the applicant has the capacity to enter into a binding contract).

NOTICE: If you are an individual with a disability who may require assistance or accommodation in order to participate in or receive the benefit of this service, program or activity, or if you desire more information, please contact the Georgia Development Authority, 1890 Hwy 138, Monroe, GA 30655 or call 770-207-4250.

NOTICE: House Bill #1160, Act #1144 signed by the Governor on April 16. 1990, states that the Georgia Development Authority shall not secure, provide, or guarantee a loan to "Anyone" convicted of a drug offense. The Borrowers shall certify that neither they nor any related parties to this loan request have been convicted of any drug offence.