

FARM LOAN APPLICATION FORM
SUPPLIER DETAILS

Farm No.	220 _____	FNQ	SEQ	NSW	VIC	SA
Name(s)	(Must be in the full names of all parties to the Milk Contract)					
Full Address						
Phone No.(s)						
Email(s)						

Loan amount sought (see Policy Guidelines for further information/maximum amount that may be borrowed)	\$ _____
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Repayment options: even monthly deductions from Milk Payments over (tick one/enter details):

___ months (max 12) **OR** ___ months to the end the of current milk contract (if less than 12 months)

Other comments/information (if applicable)

LOAN TYPE

Tick one	<input type="checkbox"/> Climatic Conditions	<input type="checkbox"/> Business Productivity Support
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1. CLIMATIC CONDITIONS

All regions	VIC/Riverina and SA only
<input type="checkbox"/> Drought <input type="checkbox"/> Disaster	<input type="checkbox"/> Water price above \$200/ML
<input type="checkbox"/> Post Drought <input type="checkbox"/> Post Disaster	<input type="checkbox"/> POST Water price above \$200/ML

Disaster event to which application refers (if applicable - please provide details):

2. BUSINESS PRODUCTIVITY SUPPORT

Cash Flow completed	Yes / No (circle one)
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Are you aware of any major, foreseeable changes to your situation that will lead to changes in the amount able to be deducted from your Milk Payments? If **Yes**, please provide details below or on a separate sheet:

Yes / No (circle one)

DECLARATION: I/we are facing a climate-related hardship situation or seek a Business Productivity opportunity, and wish to apply for a farm loan, as detailed above. I/we have read and agree to the DFMC Farm Loan Policy Guidelines and Terms and Conditions and, particular:

1. The DFMC Farm Loan will be used to fund the working capital and operational expenses of the dairy farm business, and will not be used wholly or predominantly for personal, household or domestic purposes.
2. I/we irrevocably authorise DFMC to deduct or set off from any moneys payable by DFMC to me/us, any amount payable by DFMC to me/us pursuant to the DFMC Farm Loan Terms and Conditions and to pay those amounts to DFMC.

Signed:

Name:

Signed:

Name:

Date:/...../.....

All APPLICANTS MUST SIGN ABOVE. If the loan applicant is a company, at least two Directors/Secretary to sign unless sole Director/Secretary; indicate accordingly if this is the case. NOTE: proof of identity/signature may be required, e.g. Drivers Licence.

Send your completed form by email OR post to:

By email to:

robert.goodwin@dfmc.org.au

By Post to:

Robert Goodwin
Finance Manager
Dairy Farmers Milk Co-operative
PO Box 4132
Geelong, Vic 3220

Dairy Farmers Milk Co-operative

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