AITKIN COUNTY



Septic System Replacement Loans

Aitkin County Environmental Services
Has obtained grant funds to help protect the water quality
In Aitkin County.
This money is available to upgrade substandard or
Failing septic systems.

Loan Information

➤ Interest rate for the Septic Loan is 4%
 ➤ Payback Period on the loan can be up to 10 years*
 *depends on the loan amount

This program is being sponsored by:
Security State Bank
Aitkin County Soil and Water Conservation District
Department of Agriculture
Minnesota Pollution Control Agency
Aitkin County

AITKIN COUNTY ENVIRONMENTAL SERVICES 307 SECOND STREET NW - ROOM 219 AITKIN, MN 56431

PHONE: (218) 927-7342

Thank you for your inquiry into the low interest loan money available through the Department of Agriculture Best Management Practice. Enclosed is the information and available paperwork to get you started on your septic system upgrade. These low interest loans are secured by a real estate mortgage on your property.

STEPS

- The first step is to contact a licensed SSTS Designer to conduct a site visit and to prepare a septic system design proposal. The design is then submitted to the Planning and Zoning Office whom will review the proposal to determine whether or not it meets minimum requirements.
 - Once the County approves the design, a permit can be issued. The 2023 Fee Schedule is: Drainfield/Bed = \$300.00 and Mound/At-Grade = \$350.00
- The second step is to get two estimates of cost from septic installers to install the designed system. With the estimates, you will also need to ask the installers to write down the estimated timelines for installation.
- 3. The third step is to bring the two estimates of cost, the septic system design, the Certificate of Eligibility and the top half of the Lender Pre-approval form to the Aitkin County Planning and Zoning Office.
- 4. The fourth step is to complete the loan application form supplied by Security State Bank, the lending institution for this project. Loan funds are limited to the project cost and septic system design fee and permit fees. Real estate closing costs must be paid out-of-pocket. The bank needs the following pieces of information:
 - ✓ Completed loan application.
 - ✓ Certificate of Eligibility (found in this packet)
 - ✓ Lender Pre-approval Form (found in this packet)

You will take all of this information, along with your loan application over to Security State Bank where the bank will review the application and if possible, approve the loan. Once the loan has been approved and the permit has been issued, you can begin installation.

It is the responsibility of the contractor and/or homeowner to apply for the permit. It is also that person's responsibility to contact the County at least 24 hours in advance to request an inspection of the septic system. All septic installations are inspected by the County staff. To request an inspection, please contact Aitkin County Planning and Zoning at 218-927-7342. After the inspection and after you submit the final bill to the Planning and Zoning Office, a Certificate of Completion will be issued, which you then take back to the bank. The bank will complete the loan processing using that information. Release of funds should occur in approximately two to four weeks.



Minnesota Department of Agriculture 625 Robert St. N., St. Paul, MN 55155-6120

avzw.mda.state.mo.us/agbmploans

Agricultural Best Management Practices Loan Program 651-201-6618 Fax: 651-201-6109 email: AgEMP Loan s@siase.mn. us

| AgBMP LOAN APPLICATION (Required for all applications) (Reprover Information: Name: | (One) County: Aitkin Last (optional) Name Company: |
|--|---|
| | Name Company: |
| Street Address: | |
| City: Stat | If using DLS wille in TIPIS and mark where the project or practice in on the Section Man |
| Project Information: On a Farm: Non-Farm | M: Or fill in a Latitude and Longitude of a point on the property near the project or practice. (Please get us within a few acres of where the project or practice resides if you can.) |
| Brief description of what will be purchased or constructed and | how it helps water quality; PLS |
| | PLS Township #: Range: |
| | Range: |
| Well Does this project implement Drin Does this project eliminate Groun | nking Water Standards? Section : OR |
| Is this application for a city, town, or other municipa | |
| Is this application for a facility with an Industrial Was | Pin or Parcel #: |
| OCAL GOVERNMENT APPRO | |
| Approved Loan Ame | ount \$ |
| Estimated Total Project Cost (all so | ources) \$ |
| Animal Units (Feedlot Improvements or manure handling equipment facilities > 1000 AU that are not in the Mississippi watershed are ineligible) | |
| Primary Lives | stock Dairy Beef Swine Other: |
| Primary Selection 1 Selection 2 | Conservation Tillage Total Acres Acres AFTER Project: Farmed: |
| Approval Expiration and Other Restric | |
| Project Approved by: | |
| Project Completion Certified by (OPTIONAL): | Date: |
| The state of the s | lable PDF form to the borrowers chosen lender.) |
| | und on the AgBMP mapping toot; click LENDER CONTACTS LIST to find your lender emai |
| ENDER INFORMATION & LO | |
| AgBMP Loan Request | \$ Check if Local Revolving Funds are used: Funds will not be disbursed if checked. |
| (Optional) Additional Request # | \$ Initials: Date: |
| Number of payments per year: | |
| Total Number of Payments: | |
| Interest rate (if other 3%): | % (Optional) Balloon Payment Date |
| Lender Organization Name | Aitkin County |
| Lender Address | |
| Lender Signature: | Date: |

Attach **copies** of the invoices provided by the borrower that support the request for disbursement. Please Email fillable PDF and Attachments to: AgBMP.Loans@state.mn.us

Borrower Information:

Name: Enter the borrower's name (required). Only the first individual will be recorded with the MDA as the loan recipient. This information is for ease of identifying any specific loan and may be different than shown on legal loan documents. The name should be a person, even if the loan is issued to a partnership or corporation.

Company: Enter the company name of the borrower if applicable. This is an optional field.

911 Address: The address of the borrower or project. This address should be the established 911 address of the loan recipient or the project, not a PO Box. If an individual has multiple addresses, list the address closest to the project.

City, State, Zip Code, Telephone: Enter the city and zip code for the borrower's listed 911 address. Telephone is for LGU convenience.

Project Information:

Mark the "On a Farm" box if the project is related to a farm operation. Mark the "Non-Farm" if it is not associated with a farm operation. A farm is any operation reporting farm income on their tax form. The borrower does not need to prove farm income. For example, a septic system on a farm should be marked "On a Farm", even if it is not an agricultural practice.

If the borrower is a city, town, or other municipality; or if it holds an industrial waste permit, check the appropriate box.

Brief Description: Enter a brief description of the project, less than 4 lines. Describe the project in relation to water quality, for example, "Air seeder to reduce erosion", "feedlot roof structure to control runoff", "replacement septic system to protect water quality", "replace non-compliant well".

Check the appropriate box if the project qualifies because it may be a pollution source or if it violates drinking water standards.

PLS / Township - Range - Section: List the township, range, and section number (required), not the name of the township. For example, Township 101, Range 16, Section 19, not "Adams Township". List only one T/R/S coordinate per project.

Ten Acre Location: Mark on the Section map with an "X" the location of the project (required). All locations are recorded as POINT locations; therefore, marking multiple locations cannot be entered. In order of preference, please mark: the actual project location, the farm or home site of the owner of the project, the center of an area representing the project.

Latitude & Longitude: You may enter the Latitude & Longitude instead of TRS location. You do not need both.

Borrower Signature: The borrower may sign the document; however, their signature is optional on this form.

Local Government Approval:

Enter the <u>Maximum Approved</u> amount for the loan in the appropriate category. This value may <u>overestimate</u> the actual cost of the project. If the actual cost of the project exceeds the maximum approved amount, the borrower or lender must ask for an increase in the approved amount. Such changes can be indicated by entering and initialing the change by the LGU. The AgBMP program does not required bids or quotes for project approval; however the LGU may. If left blank, the maximum amount is \$200,000.

The LGU may also indicate the Expiration Date of the project's approval. On the "Other Restrictions" line, LGU can list any other limitations or requirements.

Farm Operation Information:

Enter the number of <u>Animal Units</u> (required for manure management and feedlot projects) in the appropriate box. The number must be less than 1000. Enter the <u>Primary type of Production</u>, the type of crop (corn, wheat, etc.) or the type of livestock (dairy, hogs, custom applicator). Enter the estimated amount of <u>Conservation Tillage Acreage</u> after the practice is complete and the total of all <u>Farm Acres</u>.

Project Approval: A person authorized by the LGU to approve projects must sign the Project Approval line (required).

Completion Certification:

Once the project is complete, the LGU should sign on this line; however it is NOT required for processing. The project does not need to be complete before funds are disbursed. Funds can be disbursed based on a quote or estimate if the LGU certifies the project is complete by signing on this line.

Lender Information & Loan Terms:

Enter the amount of the request. This may be UP TO the maximum approved by LGU. The lender must indicate if locally held revolving funds will be used by selecting the "Local Revolving Funds" box (required if revolving funds are used).

An optional Additional Request Line is available for multiple requests. Enter the sequential number (2,3,4) and amount of the additional request.

The lender must report the Number of Payments per Year (required) and the Total Number of Payments for the loan (required). Enter the interest rate if it is different than 3%. If the loan has a Balloon payment, give the expected date of the Balloon Payment.

The lender must identify the lending organization's name and address receiving the funds (required).

An appropriate lender representative must sign the form (required).

Submit bills, invoices, or receipts equal to or exceeding the amount requested (required).

Submitting Form:

This application form may be emailed, faxed, or mailed to the AgBMP Loan Program at the address shown.

AITKIN COUNTY AND THE DEPARTMENT OF AGRICULTURE BEST MANAGEMENT PRACTICES PROJECT ELIGIBILITY CERTIFICATION

| Applicant Must be P | roperty Owner | | | | |
|---|--|------------------------|------------------|--|---|
| Please print | (Last Name) | | | (First) | _ |
| • | (====, | | | (/ | |
| Mailing Address | | | | | |
| | | | | | |
| (Street Address or PC | Box #) | | , | (City) | |
| Property Address – I | f different from | n Mailing Address | | | |
| | | | | | |
| | | | | | |
| (Street Address or PO | Box #) | | | (City) | |
| Daytime Telephone I | Number | () | | | |
| Legal Description: | | | | | |
| | Section | Township | Range | Township Name | - |
| Parcel Number: | | | Are Pro | perty Taxes Current? | |
| | | | | | |
| List the construction to | be done and th | ne estimated cost in | volved. | | |
| Name and Address of State MPCA License I | | | | | |
| Otate Wil OA Electise I | Tullibol | | | | |
| Item | | Est. Cost | Est. Co | ompletion Date | |
| | | | | | |
| Total Cost of Activi | itv | - | | | |
| Certification by Adm | inistrator of Be t the proposed a hip applicable g | activity meets a prior | ity need identif | fied in the Aitkin County h accepted standards, | |
| Project Representative | | | | Date: | - |
| Applicant: | | | | Date: | _ |

AITKIN COUNTY DEPARTMENT OF AGRICULTURE BEST MANAGEMENT LOAN PROGRAM LENDER PRE-APPROVAL FORM

| Applicant:: | | | | |
|---|---|--|---|-----------------|
| | (Last Name) | (First N | ame) (M | liddle Initial) |
| Address: | | , | | _, |
| | (Street Address or P | O Box #) | (City) | (Zip Code) |
| Description | of Project: | | | |
| | | | | |
| Legal Descr | intion of Property | | | |
| 20ga, 2000. | iption of Property: | Section | Township | Range |
| Parcel Num | ber: | | | |
| Estimated C | Cost of Improvements: | \$ | | Attach Estimate |
| Estimated L | oan Requested: | \$ | | |
| Estimated C | Completion Date: | | | |
| the Departmexceed: \$Construction submitted to return this c Environmen Security St Name of Le | nent of Agriculture Bes n must be approved and the Originating Lende ompleted, signed form tal Services Department ate Bank nding Institution | It Management Apple App | Practices progoproval shall exy the County an approval explication to the A | · |
| Originating I | Lenders Signature | | Da | ate |

COMPLETION OF ACTIVITY CERTIFICATION

DEPARTMENT OF AGRICULTURE BEST MANAGEMENT PRACTICE

| Borrower:(Last Name) | (First Name) | (Middle Initial) |
|--|--------------------------------|--------------------------|
| Activity Financed: | | |
| Location of Activity :Section | on Township | - Range |
| List the construction complete approved and completed for the | | nd/or other expenditures |
| Item | Total Cost \$ | CWP Portion \$ |
| | \$ \$ | \$ \$ \$ |
| | \$ | \$ |
| Total Cost of Activity Certification by the A | dministrator of Best Mana | gement Practice |
| This form certifies that compliance with accepted sta is authorized to be made by the completed on the CWP activition. | ne local lender as all applica | eria. The final payment |
| Certification Office: | | Date: |
| | | Phone: |

Uniform Residential Loan Application

This application is designed to be completed by the applicant(s) with the London's assistance. Applicants should complete this form as "Betrower" or "Co-Berrower," as applicable. Co-Berrower information must make be provided (and the appropriate box checked) when ______ the spoons or assets of a person other than the Berrower (including the Berrower's appuise) will be used as a basis for loan qualification, but his or her flabilities must be considered because the appuise or other person who has community property rights pursuant to supriscable law and Berrower resides to a community property state, the security property is located in a community property state as a basis for repayment of the loan.

If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below):

| | Co-Bonower 1. TYPE OF M | ORTGAGE AND TE | RMS OF LOAM | | |
|---|--|----------------------|---|---|--|
| Mortgage V.A. Conventional Applied for: USUA/Row House Service | Other (Explein): | Agency Cas | | Lender Casa Num | bar |
| Amount Internal Rata 4.00 |) % Type | GPI | | | loan |
| Subject Property Address (street, city, state, & ZIP) | II. PROPERTY IN | ORMATION AND F | URPOSE OF LOAN | | No of Crits |
| Legal Description of Subject Property (attach descri | (plion if necessary) | | | | 1 Year Bult |
| lend - lend | olumbian (Colonial Colonial Co | nar (Explain) | i ² rop | orty will be. Primen Secundar Residence Residence | |
| Complete this line if construction or construction Year Lot Original Cost Acquired \$ | n-permanent loan, Amount Existing Llons 5 | (a) Present Value (| of Lot [b] Cost of | Improvements Total (a | (+b) |
| Complete this line if this is a refinance loan. Year Acquired | Anount Existing Liens | Purpose of Refine | нев | Describe Improvements | mede lo bo meda |
| Tilde will be field in what Nume(s) Source of Owen Payment, Suttlement Charges and/or Subs | stainshi Financing (explain) | | Marrior marrich Title w | | Estato will be held in Fee Simple Leasehold (show expiration date) |
| Borrower Borrower 2 Name (include Jr. or Sr. if applicable) | W. Bo | DRROWER INFOR | MATION We's Name (include Jr. or Sc. | Co-Barrowe | |
| Social Security Number Huma Phone (Incl. arua coda) |) DOB (mm/dd/yyy) | Yes School Social Se | canty Number Home Pho | ne (inci aran sode) DOH | (minlistryyy) Yrs. School |
| Married Separated Unanamied (include single, diversed, wildowed) | Dispendents (not Pated by Co-Bon no ages | | ned harded (include single, diverce | La la | s (not listed by Borrawer) agas |
| Present Address (Alrant, city, state, ZIIP) Own Mailing Address, if ridfarent from Present Address | Rent | Nu fis, | okkresa (stront, city, stato, ZIP | | No Yrs |
| If residing at present address for less than two Former Address (struct, city, state, ZIP) Own | years, complete the lokowin | | Addracs (stroot, city, state, Zir | Own Renf | No Yra |
| Borrower | IV. EI | IPLOYMENT INFO | RMATION | Co-Barrow | |
| Name & Address of Employer | Self Employed Yes, amployed Yes, amployed Workford | ោ វ្រាទ្រ line of | Aukkoss of Employer | Salt Emplo | Vis. on Pis tob Vis. continues this firm (work/acctors.com |
| PositionTitle(Type of Quariess | Bysinasa Phone (Incl. ar | | Tide/Type of Buseless | - 10 | utiness Phone (incl. atea code) |
| if amployed in current position for less than tw Natos & Address of Engloyer | o years or if currently emplo Sof Employed Dates the | | ne position, complete th Address of Employer | e fallavring; | yed Date Hearn-Int |
| | Monthly \$ | псота | | | Monthly inclina |
| Position/Tibe/Typy of Business | Businers Phone (Incl. a | rea code) Postini | /Tree/Type of Business | | Business Pisone (incl. area code) |
| Stame & Address of Employer | Self Emotoyed Dates (fi | om - to) Home I | Address of Employor | Sayl Empl | |
| | | | | | Monthly to comp |
| Panisar/Tillettypa of Buchesa | Monthly \$ [huspheds Phone Crist is | | YEROTYPH of this next | | \$ Business Phone (not Meacods) |

| Originator: (NML\$ IC |): 446869) | | | | | |
|--|--------------------------|---------------------------------|--|--|--|---|
| | | | ME AND COMBINED H | OUSING EXPENSE INFORMAT | ION | |
| Gross Manthly Income Base timpl Income* | Botrower | Co-Germwar | Totat | Combined Monthly Housing Expense | Protein | 13roposed |
| Overtina Overtina | \$ | \$ | \$ | Rent | \$ | |
| Bonuses | | | | First Mortgago (P&I) | | \$ |
| Commissions | | | | Oindr Pinancing (P&I) | | |
| Dividenda/exaress | | | | Hazard Insurance | | |
| Net Rental Income | | | | Real Estate Taxes | | |
| Other (before completion. | | | | Mortgage Insurance | | |
| see the natice in "dasonbe after income," below) | | | | Pomeowner Assn. Dues | | |
| Total | \$ | \$ | \$ | | r. | |
| | L | vide addillonat documentation s | | Total | \$ | \$ |
| | | | | | 1-1 | |
| B/C | TO OTHER MEDICAL | or Co-Borrower (C) does | sepaisio maintananca inco nol choose to have it const | ome need not be revealed if the Borrow dered for repaying this loan | ver (0) | T vaccountry a |
| | | | | The state of the s | | Monthly Amount |
| | | | | | | 3 |
| | | | | | | - |
| | | | VI. ASSETS AND L | (Agi) med | | |
| This Statement and any app | Scattle supporting sched | ules may be completed owny | without a series of and a series | | shifting our sufficiently innoved | tan Day the Statement can be |
| | achedries with police of | mploined about that spouse or o | ilher person also | darea il iug co-gonowet section was | Completed about a nurr-apple | Jaintly Not Jointly |
| Description ASSI | ETS | Cash or Market Value | automobile inage, mysh | d Assets. List the creditor's name, ac ring charge executis, real exists town | drass and account number for a ultranty, child support, sloci | e 69 outstanding dobts, including 8 obtases, glo. Use continuation |
| Cath deposit toward purcha | se hald by: S | | sheat, if nocetary had of the subject property. | leals by (*) though liabilities, which will | on satisfied upon sale of real | intata award or upon rullinaviring |
| Commission of the Commission o | S | | | JABILITIES | Monthly Payment & | Unpald |
| | | | Name and address of Co | | Months Left to Pay | Balance |
| List charting === | de agoni-t | | | | a s. ach actavavanina | ,5° |
| List checking and savir | | | | | | |
| Name and address of Bank | S&L, or Credit Union | | | | | |
| 2 | | | | | | |
| | | | Acet No | | - | |
| | | | Name and address of Co | vneanv | \$ Payment/Months | 3 |
| Aord, No. | | \$ | | an proof | 5. atimelia di Aliana | * |
| | | | | | | |
| Name and address of Bank, | S&L, or Credit Union | | | | | |
| | | | | | | |
| | | | Acct, No | | - | |
| | | | Name and eddress of Co | armunaal. | 3 Paymontitécnitis | 3 |
| Acct, No. | | B | Ivalia and andress or co | приту | * Payminton mars | ** |
| | | | | | 1 | |
| Name and address of Bank, 5 | S&L, or Cradit Union | | | | 1 | |
| | 1 | | | | 1 | |
| | | | Agel No. | | - | |
| | | | Acct No | | a fi | |
| And No. | | 5 | Namo and address of Co | niihanii | \$ Phytogol/Idenths | 5 |
| | | | } | | | |
| Name and address of Bunk, S | S&L, or Cradit Union | | | K | 1 | |
| | | | | | | |
| 300 | | | Acct No | | - | |
| | | | Nama and address of Co | ng a a a a | © Payment/Months | \$ |
| Acel No | 1 | | THUMB and addrags in Co | mpany | d Faymonianonins | • |
| State I Have I de | | | | | | |
| Stacks & Bords (Company no description | amendumos a | | | | 1 | |
| | - 1 | | | | | |
| | 1 | | Acet No | | - | |
| | | | Namo and address of Cu | | \$ Paymeni/Months | 5 |
| | | | Manio aud agordes di Co | прац | 5 Paymenomonins | |
| ide insurance est cault value ace amount: \$ | · . | S | | | | 1 |
| - Van Aire | | | 1 | | 1 | 1 |
| Subtotal Liquid Asse | | | J. | | | 1 |
| chedule of real estate owner | ricut value (man | 5 | Acct No. | | - 8 | |
| 777 | | | Name and address of Co | | \$ Paymen/Months | ī |
| footad interest in retirement | | | Matthe Hurd add: 622 or Co | дпрапу | # Layus no would a | |
| (et worth of trundses(es) ow etlach fluoncial statement) | nod | 5 | | | | |
| | | | | | | |
| Netherland (make an | id year) | \$ | l . | | | (|
| | i i | | | | _ | 1 |
| | 1 | | Acci, No. | | | |
| There America Comment | | | lo | sparate Maintanance Paymonts Owed | \$ | |
| Dhite Assets (domice) | | S | Job Related Expanse (ch | Ild care uniting down ate.) | ie . | 4 |
| | 1 | | And Linesetted Exhause (cu | ini serie, urayii gues 810) | \$ | |
| | 1 | | ľ | | | |
| | | | | | 1 | 4 |
| | 1 | | Total Monthly Pa | | \$ | |
| T- | otal Assets a. | P | Net Worth (a minus l | սլ `\$ | Total Liabilities b. | 3 |
| | | | | | | |

Co-Rarrower Freddie Mac Form 85 7/05 (rev. 6/09), Fannio Mae Form 1003 7/05 (rev. 6/09)

Originator: (NMLS ID: 446869) VI. ASSETS AND LIABILITIES (cont.) (If additional properties are Schedule of Roal Estate Owned Net Ronful Incoms Property Address (entat S if sold, PS if panilling sale, or R if rental being held for [cccma] angagh oM ic In. Present Macket Value 8 Lions Maintemanco Faxos & Afric Totals 1 Ust any additional names under which credit has proviously been received and indicate appropriate creditor name(s) and account number(s): Account Number VIII. DECLARATIONS VII. DETAILS OF TRANSACTION If you answer "fes" to any questions a through it, please use continuation steet for explanation. Са-Воггожег Purchasu telop Bottower Yes No tr. Attendions Improvements, repairs Are there any outstanding judgments against your (and (d acquired separately) Have you been declared bankrupt within the past 7 years? d. Retinance (incl. debts to be paid off) Have you had properly foreclosed upon or given title or deed in hou thereof in the test 7 years? u Estimated propaid items 0.00 f. Estimated clowing coats 0,00 Are you a party to a lawsuit? Hove you directly or indirectly been obligated an any lean which exhibited in forectorum, fransfor of title in televal forectorum, or programm? (This would include such fears as none mortgage loans, 38A leans, franse exprovement loans, educational loans, manufactured trisobje) from loans, and loans is programmed in fransis obligations, bonds, or loans grammed in first, and and fears, and the loans are and address of Lender, FHA or VA caso number, if any, and reasons for the artists. PAUL MIP, Funding File 9 h. Discount (d'Borrowse will pay) 0.00 Total costs (add items a through h) 0.00 Subordinate financing Are you procently balinquent or in default on any Federal debt or any other toan, mortnego, financial obligation, bond, or loan guarantee? k. Borrower's closing costs paid by Seller Other Credits (explain) Application Deposit Are you obligated to pay almony, child support, or separate Earnest Money Is any part of the down payment borrowed? Are you a co-maker or andorser on a note? All you a U.S. offero? Are you a personnent resident atten? On you intend to occupy the property as your primary residence? If "Yes," complete question in below. Have you had an ownership interest in a property in the last three years? Loan securit (exclude PMI, MIP, Funding Fee (1) What type of property did you own -- primapal residence (PR), accord from (SH), or investment occopidly (IP)?
(2) Haw did you hold tille to the horse -- solely by yourself (S), jointly with your spouse (SP), or jointly with another person (O)? PMI,MIP, Funding Fee Snunced Logo amount (add in 5 a) IX. ACKNOWLEGIMENT AND AGREEMENT

Each of the uncerspaned spacefeelily represents to sender and to Lendor's stand or potential agents, brekens, processors, insurers, servicers, successors and assigns and agreement and acknowledges that, (1) the information provided in this application is true and corned as of the date of city to date of the IX. ACKNOWLEDGMENT AND AGREEMENT appears.

Rach of the undersigned hetely acknowledges that any owner of the Lean, its services, successors and assigns, may verify or reverify any information contained in this application or obtain the property of the relating to the Lean, for any highlands business purpose through any source, including a source named in this application or a consumer reporting agency. Quite Co-Honower's Signature Barrower's Signature X X X. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

In debaying information is requested by the Endered Government for correct types of insign statistics in a natively or monitor the lender's contributions with equal expectations, the note rigid to a reading or order to monitor the lender's contributions with equal expectations, or on white monitors have been supported to the read the state of the state o CO-BORROWER | I do not wish to furnish this information BORROWER do not wish to furnish this information. Not Asian Ellapanic or Lotino Ethnicity: Ethnicity: Not Hispanie or Latino Not Hispanic or Latino Hispanic or Lating Black of African American American Indian or Race: Race: American Indian or Alaska Mativa Black or African American Asjen Alaska Native White Native Havas and of Other Public Islander Mative Hawtings or Other Proofs Islandsi White Sex: Sex: Famale Mala To be Completed by Loan Originator This information was provided: In a face-to-tace interview By the applicant and submitted by fax or mail In a idiaphone interview By the applicant and submitted via e-pail or the Internal Loan Originator's Signature X Vanessa L Prince own Originator's Phone Number (including area code) Loan Originator Identifier Loan Originator's Name (print or type) 446869 (218) 927-3765 Vanessa L Prince aun Odyination Company's Address oan Origination Company kientifier Loan Oligination Company's Name 402 Minnesota Avenue Security State Bank of Aitkin Aitkin, MN 56431

| 46-1-2 | Continuation Sheet / Resid | lential Loan Application |
|--|----------------------------|--------------------------|
| Use this continuation sheet if you need more space to complete the Residential Loan Application. Mark II for Botrower or | Bornwert | Aguncy Case Number |
| C for Co-floorouse | Со-Вогтомог | Lander Case Number: |
| | | |

Whe fully understand that it is a Federal units punishable by two or imprisonment, or both, to knowledy make any faire stationed to communing any of the skylve facts as applicable under the provisions of Title 18, Unded States Code, Section 1001, or seq.

| Domowee's Stanzisca | | And the second s | |
|-----------------------|---|--|-------------|
| Controver's arganized | Date | Co-Borrowor's Signature | Oate |
| V | CONTRACTOR OF THE PARTY OF THE | Sir aditanta a Signatura | de actività |
| X | | V . | |
| | | ^ | |