



Authorization and Consent to Lien Undersigned Crop Insurance Proceeds

THIS AUTHORIZATION AND CONSENT provided by the Undersigned authorizes the Crop Insurance Co. _____ to allow Star of the West Milling Co. to secure through a lien on the undersigned's crop insurance, the proceeds of said crop insurance. The Undersigned has either applied for, or received an extension of credit from Star of the West Milling Co. The Undersigned understands that by authorizing Star of the West Milling Co. to secure the proceeds of said crop insurance Star of the West Milling Co. has first rights to said proceeds, ahead of the Undersigned, to ensure that any of the Undersigned's outstanding debt to Star of the West Milling Co. can be paid by said proceeds. Star of the West Milling Co. may verify the following, including but not limited to: information provided by the Undersigned, any other document mandated or requested by Star of the West Milling Co. in connection with the application or for reasons connected with the crop insurance lien, and any financial information supporting the Undersigned's financial condition, other loan obligations, or creditworthiness. The Undersigned hereby authorizes Star of the West Milling Co. to obtain from any applicable third parties any and all information or documentation to secure the crop lien from said Crop Insurance Company.

The crop insurance documentation must show that Star of the West Milling Co. is assigned as loss payee and a copy of the insurance must be provided by April 1st or the account becomes payable in full.

Crop Insurance Company: _____

Address: _____ City: _____ State: _____ Zip Code _____

Agent: _____ Phone: _____ Email: _____

Date: _____

An electronic reproduction of this fully-executed document shall be as valid as the original. Insert name of Undersigned

By:	
Signature	
By:	
	Signature
By:	
	Signature



**AUTHORIZATION AND CONSENT TO LIEN UNDERSIGNED CROP
INSURANCE PROCEEDS**

ORIGINATOR:

ISSUED DATE: 3/12/2019

Page 1 of 1

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