



Sugarbeet Limited Partnership Information Sheet

FARM / GROWER INFORMATION

Farm / Grower Name: _____ Date: _____

Farming Experience: _____

Sugarbeet Experience: _____

Total Acres Farmed: _____ Sugarbeet Acres Farmed: _____

Other Crops Grown: _____

Farming Operation State (ND or MN): _____

Counties Where Crops Grown: _____

Crop Insurance Coverage Level: _____

Additional Information: _____

References

Limited Partner Reference: _____

Contact Information: _____

Financial Reference: _____

Contact Information: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____