

Document 2009 503

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LISA SMITH, COUNTY RECORDER
MADISON IOWA

SUBORDINATION AGREEMENT

✓ **Preparer Information:** (Individual's name, address and phone number)

Gary VanGelder, FLPO
Madison County Farm Service Agency
815 E. Hwy 92, Winterset, IA 50273 (515) 462-4884

Taxpayer Information: (Taxpayer's name and full mailing address)

Return Document To: (Name and full mailing address)

Same as Preparer

Grantors:
Union State Bank

Grantees:
Commodity Credit Corporation

Parcel Identification Number: (If required or applicable)

Legal Description:

Document or instrument number of associated documents previously recorded:

CCC-194
(03-13-01)

U.S. DEPARTMENT OF AGRICULTURE
Commodity Credit Corporation

FARM STORAGE FACILITY LOAN SUBORDINATION AGREEMENT
(LIEN ON REAL PROPERTY)

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is 7 CFR Part 1436, Title 7, Code of Federal Regulations and the Commodity Credit Corporation Charter Act, 15 U.S.C. 714 et seq. The information will be used to determine eligibility for CCC financing for farm storage and drying equipment. Furnishing the requested information is voluntary. Failure to furnish the requested information will result in disapproval of CCC financing. This information may be provided to other agencies, IRS, Department of Justice, or other State and Federal Law enforcement agencies, and in response to a court magistrate or administrative tribunal. The provisions of criminal and civil fraud statutes, including 18 USC 286, 287, 371, 641, 651, 1001; 15 USC 714m; and 31 USC 3729, may be applicable to the information provided.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0560-0204. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

1. BORROWER'S NAME AND ADDRESS (Including ZIP Code) Steven Dean Queck and Dara Jean Queck 2799 295 th Street Peru, IA 50222	2. BORROWER'S TELEPHONE NUMBER (Including Area Code) 515 971-7007
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3. WHEREAS, (a) Steven Queck and Dara Queck (hereinafter called the "Borrower"), has applied to Commodity Credit Corporation (hereinafter called "CCC"), an agency of the United States for a loan for the purpose of erecting or constructing a storage facility on premises situated in the County of (b) Madison, State of (c) Iowa.

4. WHEREAS, the making of such a loan by CCC is conditioned upon the Borrower conveying to CCC a first lien on the following described real estate: See Attachment

5. WHEREAS, the undersigned is owner and holder of a certain real estate mortgage, deed of trust, or other security instrument on the premises, where such interest is recorded in Book (a) 2006, Page (b) 2701, of said county and State:

Now, therefore, in consideration of CCC making such loan, the undersigned agrees to and does hereby subordinate its lien on the above described real estate to any mortgage, deed of trust, or other security instrument executed or to be executed by the Borrower in favor of CCC, concerning the above described real estate and the facility located thereon, and to the right of ingress and egress to and from the site.

6. IN WITNESS WHEREOF, the undersigned have executed these presents this (a) 19th day of (b) Feb (c) 2009 (d) Jeff Nolan Pres CCC (SEAL)
(Lienholder's Signature)

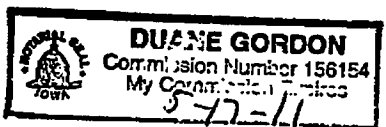
(Lienholder's Signature) (SEAL)

(Lienholder's Signature) (SEAL)

(e) STATE OF Iowa
(f) COUNTY OF Madison } ss.

ACKNOWLEDGMENT

On this (g) 19th day of (h) Feb in the year (i) 2009, before me, the undersigned, a Notary Public in and for said State, personally appeared (j) Jeff Nolan and (k) _____ personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he, she, and or they executed the same in his, her and or their capacity or capacities, and that by his, her, and or their signature(s) on the instrument, the individual(s) or the person on behalf of which the individual(s) acted, execute the instrument.



(SEAL) (l) Duane Gordon (Name of Notary Public)
My commission expires on (m) 5-7-11 (MM-DD-YYYY)

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The South 10 Acres of the Southeast Quarter (1/4) of the Southeast Quarter (1/4) of Section One (1) and the East Half (1/2) of the Northeast Quarter (1/4) of Section Twelve (12) in Township Seventy-four (74) North, Range Twenty-seven (27), and the South Half (1/2) of the Southwest Fractional Quarter (1/4) (containing 33 30 acres) of Section Six (6) and the Northwest Fractional Quarter (1/4) (containing 67 64 acres), and the Northeast Quarter (1/4), of Section Seven (7), in Township Seventy-four (74) North, Range Twenty-six (26) West of the 5th P. M., Madison County, Iowa