

STATE OF IDAHO - REQUEST FOR INFORMATION OR COPIES - UCC-4

Mail to: Secretary of State, UCC Division, 700 W Jefferson, PO Box 83720, Boise ID 83720-0080
 Telephone: 208-334-3191 Fax: 208-334-2847

Instructions

1. Enter your Secretary of State customer number (if known) in the requesting party section. If the fee is to be charged to your pre-paid account, the customer number must be entered.
2. Enter the name of the Debtor (or Producer) exactly as you want it to be searched. **Enter only one name.**
3. In the Address block, you may enter either a complete address or a city name to limit the scope of the search. You may enter "Any address" if you want all filings against the Debtor name without regard to location.

This block for Filing Office use only.

Debtor, Producer or Purchaser of Agricultural Products on whom information is requested.			Name and address of requesting party	
Organization or Indiv. Last Name				
First Name	Middle Name	Suffix		
Address				
City			State	Zip
			Customer account number	
			Contact Person	
			Phone #	

INFORMATION REQUEST	COPY REQUEST
<p>Filing officer: Please furnish a certificate showing any presently effective notices of the types indicated below relating to the above named Debtor or Producer. (Check box(es) for type(s) of notices to be reported on certificate. Check one or more. If no boxes are checked, it will be assumed you want all types.)</p> <p><input type="checkbox"/> UCC financing statements (other than farm products) (*)See note below.</p> <p><input type="checkbox"/> Government Liens (IRS, indigent, employment, state tax, etc.)</p> <p><input type="checkbox"/> Effective financing statements (EFS) pertaining to farm products</p> <p><input type="checkbox"/> Liens in crops, for seed or farm labor</p> <p><input type="checkbox"/> Liens on agricultural products, after sale/delivery to purchasers</p>	<p><input type="checkbox"/> Filing officer: If this box is checked, please provide a copy of the documents reported on the certificate.</p>

Include all active filings. **Checking this box will cause your search results to include lapsed filings within one year of lapse date.**

Signature of Requesting Party:

1. If only one notice type is checked in the information request, enter \$6.00. If more than one is checked, enter \$10.00. If Agricultural Products information request, enter \$5.00. (*) NOTE: If you are requesting basic search only , the fee is \$12.00 regardless of whether it is info. only, info. with copies or expedited service requested.	\$
2. If copies are requested, enter \$6.00.	\$
3. If the request is not typed, enter \$4.00.	\$
4. If expedited service is requested, enter \$10.00. Indicate how you want the search handled by checking the appropriate box.	\$
<input type="checkbox"/> Mail to requesting party <input type="checkbox"/> Courier company & account # _____ <input type="checkbox"/> Call when ready _____ <input type="checkbox"/> Fax # _____	
Pay this amount (If charging to your pre-paid account, please be sure you have filled in your customer account number.)	\$