

Commercial/Corporate Farm Credit Application

PATRONAGE NUMBER

**1. IDENTIFICATION**

Name of Applicant \_\_\_\_\_ Telephone No. ( ) \_\_\_\_\_  
 Fax No. ( ) \_\_\_\_\_  
 Name of Partner \_\_\_\_\_ Telephone No. ( ) \_\_\_\_\_  
 Fax No. ( ) \_\_\_\_\_  
 Trade Name / Business Name (If different from above) \_\_\_\_\_  
 Address (If P. O. Box provide Street Address as well) \_\_\_\_\_  
 City / Town \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_  
 E-mail \_\_\_\_\_

**2. BUSINESS INFORMATION**

Nature of Business \_\_\_\_\_ GST No. \_\_\_\_\_ PST No. \_\_\_\_\_  
 Check One Box  Corporation  Partnership  Sole Proprietorship  Other (Specify) \_\_\_\_\_  
 Length of Time in Business \_\_\_\_\_ Years Incorporation Date \_\_\_\_\_  
 No. of Employees \_\_\_\_\_  
 Accounts Payable Contact \_\_\_\_\_ Telephone No. ( ) \_\_\_\_\_  
 If a Subsidiary, Branch or Division, Please State Parent Corporation  
 Name \_\_\_\_\_ Telephone No. ( ) \_\_\_\_\_  
 Fax No. ( ) \_\_\_\_\_  
 Address \_\_\_\_\_  
 City / Town \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_  
 Financial Statements for the Year of \_\_\_\_\_ Prepared. Will Provide Copy  
 YES  NO  ATTACHED.  
 Financial Information Provided Will Be Held in Strictest Confidence and Used for Credit Purposes Only.  
 Officers, Partners or Owner's Name Title Home Address (Partners or Owner) Birth Date (MM/DD/YY)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**3. REFERENCES**

Financial Institution \_\_\_\_\_  
 Account Manager \_\_\_\_\_  
 Address \_\_\_\_\_ Account No. \_\_\_\_\_  
 Telephone No. ( ) \_\_\_\_\_  
 Current Trade Suppliers Name Address Telephone No.  
 \_\_\_\_\_ ( ) \_\_\_\_\_  
 \_\_\_\_\_ ( ) \_\_\_\_\_  
 Current Fuel Suppliers Name Address \_\_\_\_\_  
 Account No. \_\_\_\_\_  
 Telephone No. ( ) \_\_\_\_\_  
 Are there any legal actions pending against you or your partner(s)?  YES  NO  
 Have you or your partner(s) been discharged from bankruptcy in the last 6 years?  YES  NO

**3. COMPLETE THIS PORTION FOR CORPORATE FARM USE**

|   |   |                                 |                                  |                   |         |
|---|---|---------------------------------|----------------------------------|-------------------|---------|
| A | Legal Description of Land                   | Section(s) Meridian             | Township                         | Range             | West of |
|   | How long have you farmed?                   |                                 | Acres Farmed                     |                   |         |
| G | Is Livestock Financed If So by Third Party? |                                 | Number and Who?                  | Type of Livestock |         |
|   | Owner <input type="checkbox"/>              | Tenant <input type="checkbox"/> | Name of Mortgage Co. or Landlord |                   |         |
| O | Name of Insurance Company and Agent         |                                 |                                  |                   |         |

**3. ACCOUNT INFORMATION**

Charge \_\_\_\_\_ Credit Limit Desired \$ \_\_\_\_\_ No. of \_\_\_\_\_  
 No. of Cardlock \_\_\_\_\_  
 Estimated Monthly Co-op Purchases \$ \_\_\_\_\_ Cards Requested \_\_\_\_\_ Cards Requested \_\_\_\_\_

**PLEASE READ, DATE AND SIGN**

I/We Certify that the above information is true. I/We certify that I am/we are entering into this credit agreement primarily for commercial purposes (that is, not personal, family or household purposes), or for corporate farming purposes. I am/We are at least the minimum adult age. I/We understand the Co-op may accept or reject this application. If this credit application is accepted, I am/We are bound by the Co-op's Commercial/Corporate Farm Credit Agreement and Statement of Disclosure and any amendments or replacements which the Co-op sends me. I/We have retained a copy of the Commercial/Corporate Farm Credit Agreement and Statement of Disclosure. If the Co-op has service cards, I request a Co-op service card to be issued to me and to the partner set out below. Where a partner signs this application with me, we acknowledge that the terms of this application and all consents given in it bind both of us. We agree to be jointly and individually liable, which means we are liable both individually and together for all amounts charged to the account. If this application is made by a corporation, each of the above statements is considered to be made by an authorized person on behalf of the corporation with all necessary grammatical changes.

I/We/the Corporation consent(s) to the exchange of account and credit information and personal information from time to time by the Co-op and the financial references provided and to the exchange of credit information with any credit grantor, credit bureau, credit reporting agency, or my/our employer(s).

DATE: \_\_\_\_\_

**Signing by Corporate Applicant**

MM DD YY

**Signing by Individual Applicants**

X \_\_\_\_\_ Card for Partner Corporate Applicant's Name

Individual Applicant's Signature YES  By: X \_\_\_\_\_

NO  Signature

X \_\_\_\_\_

Partner's Signature (if applicable) \_\_\_\_\_

Title \_\_\_\_\_