



CONFIDENTIAL FARM/COMMERCIAL ACCOUNT APPLICATION

PLEASE PRINT *REQUIRED INFORMATION (INCOMPLETE OR ILLEGIBLE INFORMATION WILL DELAY PROCESSING)

*PURPOSE	<input type="checkbox"/> STORE	<input type="checkbox"/> GAS BAR/CARDLOCK	<input type="checkbox"/> PROPANE	*CREDIT REQUIRED: \$ _____	*APPLICANT INITIALS: _____
	<input type="checkbox"/> BUL KFUEL	<input type="checkbox"/> CROP INPUTS	<input type="checkbox"/> FEED	SALES REP: _____	

* Identity: Corporation Limited Co-operative Subsidiary Partnership Proprietorship

Full Legal Name of Farm / Business: _____

*Farm / Business Location (Urban): _____
 P.O. BOX STREET NAME AND # TOWN POSTAL CODE

(Rural): _____
 911# ROAD NAME RR# TOWN POSTAL CODE

*Email Address: _____

*Farm / Business #: _____ Grower Pest Lic. #: _____ Exp ____/____

*Land & Buildings: Owned *Legally Registered to: _____
 Rented *Name of Landlord: _____

*Equipment: Owned Leased *If leased from whom _____

Nature of Business: _____

*Date Business Established: _____ Phone #: _____

Total Acres: _____ Acres Owned: _____ Acres Rented: _____

* Officers/Partners

- _____
 Title Date of Birth (DD/MM/YYYY) Phone#
- _____
 Title Date of Birth (DD/MM/YYYY) Phone#

*Trade References/Suppliers

- _____
 Name Phone# Email:
- _____
 Name Phone # Email:

THE UNDERSIGNED ALSO UNDERSTANDS THAT ALL PURCHASES ARE DUE AND PAYABLE IN FULL NO LATER THAN THE 20TH OF THE MONTH FOLLOWING THE PURCHASE. THE UNDERSIGNED CERTIFIES THE ABOVE INFORMATION TO BE TRUE AND AFFIRMS THAT ANY CREDIT GIVEN TO ME IS EXTENDED ON THE BASIS OF SUCH INFORMATION. The undersigned consents to the obtaining of credit and or personal information as may be required at any time in connection with the credit hereby applied for, any credit renewal or extension thereof and to the disclosure of any credit information concerning the undersigned to any credit reporting agency or to any person with whom the undersigned has or proposes to have financial relations. THE UNDERSIGNED FURTHER ACKNOWLEDGES THAT I HAVE BEEN INFORMED OF YOUR PREVAILING TERMS FOR REPAYMENT AND AGREE TO PAY AN INTEREST CHARGE OF 2.00 % PER MONTH (26.81% PER ANNUM) ON ANY OVERDUE BALANCE UNTIL PAID.

*Membership (Every new account is automatically charged a membership fee of \$20.00)

Would you like to receive promotional emails?

Would you like to receive invoices via email?

*Date: _____

ID Verification

*Date: _____

* Authorized Signature(s): _____

*Print Name(s): _____

*Title(s): _____

*Witness Print: _____

*Witness Signature: _____

CREDIT DEPARTMENT USE ONLY
Credit Authorization: _____ Date: _____