

Commercial / Corporate Farm Credit Application	PATRONAGE NUMBER
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1. IDENTIFICATION

Name of Applicant _____ Phone No. _____

Name of Partner _____ Phone No. _____

Trade Name / Business Name (if different from above) _____

Address (if P.O. box, provide street address as well)

City/Town _____ Province _____ Postal Code _____

Email _____

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 _____

Accounts Payable Contact _____ Phone No. _____

If a subsidiary, branch or division, please state parent corporation:

Name _____ Phone No. _____ Fax No. _____

City/Town _____ Province _____ Postal Code _____

Financial statements for the year of _____ prepared. Copy Provided: Yes No Attached

*Financial information provided will be held in strictest confidence and used for credit purpose only.

Officers, Partners, or Owner's Name	Title	Home Address (Partners or Owner)	Birth Date
_____	_____	_____	_____
_____	_____	_____	_____

3. REFERENCES

Financial Institution _____ Account Manager _____

Address _____ City/Town _____ Province _____ Postal Code _____

Phone No. _____ Fax No. _____

Current Trade Suppliers Name _____ Address _____ Phone No. _____ Account No. _____

Current Fuel Suppliers Name _____ Address _____ Phone No. _____ Account 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

4. COMPLETE THIS PORTION FOR CORPORATE FARM USE

Legal Description of Land _____ Section(s) _____ Township _____ Range _____ West of _____

How long have you farmed? _____ Acres Farmed _____

Is livestock financed by third party? If so, number and who? _____

Type of Livestock _____

Owner Tenant Name of Mortgage Co. or Landlord _____

Name of Insurance Co. & Agent _____

5. ACCOUNT INFORMATION

Credit Limit Desired \$ _____ Estimated Monthly Co-op Purchases \$ _____

No. of Charge Cards Requested _____ Type of Purchases _____

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: _____
 MM / DD / YY

SIGN X _____
 Individual Applicant's Signature

 Corporate Applicant's Name

SIGN X _____
 Partner's Signature (if applicable)

X _____
 Signature

 Title

PLEASE RETAIN STATEMENT OF DISCLOSURE FOR YOUR INFORMATION AND TERMS OF THIS CREDIT AGREEMENT. CALL 306-791-9312 FOR FURTHER CLARIFICATION OR EMAIL CREDIT@SHERWOODCO-OP.COM.