

# CREDIT APPLICATION

## SECTION 1

**TO BE COMPLETED ONLY IF THE APPLICANT(S) IS  
AN INDIVIDUAL OR GUARANTOR OF THE APPLICANT(S)**

Patron Name		SS#	
Driver's License Number			
Address		City	
State		Zip	Phone
Directions to your address			
Employer Name:			
Employer Address			
Employer Phone#		Length of Employment	

Co-Patron Name		SS#	
Driver's License Number			
Address		City	
State		Zip	Phone
Directions to your address			
Co-Patron Employer Name:			
Name/Address			
Phone#		Length of Employment	

<b>Patron Bank:</b>			
Address		Phone#	
Name on account			
Type of account		Account#	
Trade Reference			
Items you wish to purchase			
<b>Co-Patron Bank</b>			
Address		Phone#	
Name on account			
Type of account		Account#	
Trade Reference			
Items you wish to purchase			

I hereby authorize bank named above to release information requested for the purpose of obtaining and/or reviewing credit.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Co-Applicant \_\_\_\_\_ Date \_\_\_\_\_

**SECTION 2 (TO BE COMPLETED ONLY IF THE APPLICANT IS A BUSINESS ENTITY)**

**A. APPLICANT**

Legal Business Name		TIN#	
Other Business Names			
(List all Trade Names, DBA's and specify any Divisions or Subsidiaries)			
Street Address			
City		State	Zip
Mailing Address			
City		State	Zip
Phone		Fax	Email
Ship-to Address			

**B. BUSINESS INFORMATION**

(Mark and fill in the appropriate row below. Applicant must provide the names of all partners, members, principals or trustees. Additional space is provided at the bottom of this section; please provide an additional attachment as needed.)

- Partnership    Partner \_\_\_\_\_ Partner \_\_\_\_\_  
                                  Partner \_\_\_\_\_ Partner \_\_\_\_\_
  
- Corporation    President \_\_\_\_\_ Secretary \_\_\_\_\_
  
- LLC                Manager / Member (circle one) \_\_\_\_\_  
                                  Member \_\_\_\_\_ Member \_\_\_\_\_
  
- Other: LP / LLP / Joint Venture / Trust (circle one)  
                                  Principal / Partner / Trustee (circle one) \_\_\_\_\_  
                                  Principal / Partner / Trustee (circle one) \_\_\_\_\_
  
- Additional Principal / Partner / Trustee / Member (circle one) \_\_\_\_\_
- Additional Principal / Partner / Trustee / Member (circle one) \_\_\_\_\_

**C. BANKING INFORMATION**

<b>Bank</b>			
Address		Phone#	
Name on account			
Type of account		Account#	

I hereby authorize bank named above to release information requested for the purpose of obtaining and/or reviewing credit.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**D. TRADE REFERENCES (Please provide three references)**

	<u>Name</u>	<u>Contact</u>	<u>Address</u>
1.	_____		
2.	_____		
3.	_____		

### SECTION 3 (TO BE COMPLETED BY ALL APPLICANTS)

*Ag Partners Cooperative, Inc., Seneca, Kansas, offers convenience credit only.*

Applicant hereby authorizes Company, or its designee (Credit Information Systems) to contact credit-reporting agencies and the above-named references regarding Applicant's credit and financial responsibility for the purpose of obtaining credit and for review for the purpose of maintaining the credit relationship. Applicant directs the References to provide relevant information to the Company. Applicant agrees that as a condition of extension of credit, the Company may now or may hereafter require Applicant to submit verifiable financial statement(s) to the Company, and Company may further require Security Interests, Letters of Credit, Input Liens, or acceptable Guarantees, or such other instruments the Company deems necessary in its sole discretion.

The undersigned submits that he/she has actual authority to hereunto subscribe, is authorized by the Applicant to enter into this agreement, and that the information provided above is true and correct.

Name of Applicant: \_\_\_\_\_

By \_\_\_\_\_ Title \_\_\_\_\_

Name of Co-Applicant: \_\_\_\_\_

By \_\_\_\_\_ Title \_\_\_\_\_

NOTE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal Agency that administers compliance with the laws concerning this creditor is the FEDERAL TRADE COMMISSION, EQUAL CREDIT OPPORTUNITY, WASHINGTON, D.C.

Office Use Only

Approved by \_\_\_\_\_

Opening Limit \_\_\_\_\_

Guarantee Required: \_\_\_\_\_

Guarantee Obtained: \_\_\_\_\_