



PERSONAL CREDIT APPLICATION

Please return the completed form to (613) 443-1820 or admin@coopembrun.com.

If this is for a business/farm, you must complete a BUSINESS CREDIT APPLICATION.

PERSONAL INFORMATION					
Full Name of Applicant					
Street Address				Owner	Tenant
City, Province		Postal Code			
Phone (home)		Phone (Cell)			
Date of Birth (MM/DD/YYYY)		SIN or Driver's License Number			
Email Address					
Full name of spouse or co-applicant					
WORK REFERENCES					
Applicant					
Name of Employer			Annual Income		
Since			Phone		
Employer Address					
Co-applicant / Spouse					
Name of Employer			Annual Income		
Employer Address			Phone		
BANK REFERENCE					
Bank Name			Contact		
Branch			Address		
Account #			Phone		
CREDIT REQUESTED					
Amount	\$	Products to be charged	Hardware	Farm	Energy
TERMS & CONDITIONS					
<ol style="list-style-type: none"> Unless there exists a pre-approved agreement with the La Coopérative agricole d'Embrun Ltée, all purchases are payable by the 15th day of the month following the purchase. An administration fee of 2% per month (24% per year) will be payable on any unpaid balances over 30 days. A \$50.00 fee will be required for all cheques returned due to insufficient funds. In the event of default and if the account must be submitted to a collection agency licensee, an amount equal to 30% of the balance owed at that date will be added to the account to provide for recovery costs. I hereby authorize La Coopérative agricole d'Embrun Ltée and / or its agents to communicate with me regarding this account using the email address provided above. I hereby authorize La Coopérative agricole d'Embrun Ltée and / or its agents to obtain and verify information on the credit habits of the business and its owners at any time when the account is active. I understand that all information provided will be kept strictly confidential and will be used solely for the purposes of determining the amount and terms of credit to be granted. <p>I have read the terms and conditions listed above, I understand and accept by way of signature below.</p> <p>SIGNATURE _____ PRINT NAME _____ DATE _____</p>					
GUARANTOR					
I, the undersigned guarantor, jointly guarantee payment of any accounts rendered by the La Coopérative agricole d'Embrun Ltée to the above-named applicant for materials supplied or delivered.					
SIGNATURE _____ PRINT NAME _____ DATE _____					



ADDITIONAL GUARANTORS *(not required)*

I, the undersigned guarantor, jointly guarantee payment of any accounts rendered by the La Cooperative agricole d'Embrun Itée to the above-named applicant for materials supplied or delivered.

SIGNATURE _____ PRINT NAME _____ DATE _____

SIGNATURE _____ PRINT NAME _____ DATE _____

SIGNATURE _____ PRINT NAME _____ DATE _____