BUSINESS CREDIT APPLICATION

Please return the completed form to admin@coopembrun.com.

BUSINESS INFORMATION								
Name of Business / Farm								
Legal Name								
Street Address, City								
Province, Postal Code				Phone				
DESCRIPTION OF BUSINESS								
Date Business Commenced			HST #		__ __ __ __ __ RT __ __ __ __			
Type of Business	Sole Proprietorship		Partnership		Corporation			
	Farm		Other (describe)					
Accounts Payable Contact			Phone					
A/P Email								
IF SOLE PROPRIETORSHIP, PARTNERSHIP, OR FARM								
Owner Name								
Date of Birth (MM/DD/YYYY)			Phone					
BANK REFERENCE								
Bank Name			Contact					
Branch			Address					
Account #			Phone					
TRADE REFERENCES								
Name			Phone					
Name			Phone					
CREDIT REQUESTED								
Amount	$	Products to be charged	Hardware		Farm		Energy	

TERMS & CONDITIONS

1. Unless there exists a pre-approved agreement with the La Coopérative Agricole d'Embrun Ltée, all purchases are payable by the 20th day of the month following the purchase.
2. An administration fee of 2% per month (24% per year) will be payable on any unpaid balances over 30 days.
3. A $50.00 fee will be required for all cheques returned due to insufficient funds.
4. 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.
5. 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.
6. 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.

I have read the terms and conditions listed above, I understand and accept by way of signature below.

SIGNATURE _____ PRINT NAME _____ DATE _____

GUARANTOR

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

SIGNATURE _____ PRINT NAME _____ DATE _____

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