

PRODUCER CREDIT APPLICATION



LIMIT REQUESTED \$ _____

INFORMATION ABOUT YOURSELF (TELL US WHO YOU ARE)

*Customer/Applicant Name/Business Name _____ *Customer SSN/EIN _____

*Applicant Home Address/Business Address _____ City _____ State _____ Zip _____

Type of Business: Proprietorship General Partnership Ltd Partnership Corporation LLC *DOB ____/____/____

Mailing Address (if different from physical) _____ County _____ Primary Type of Farming _____

Home/Phone# _____ Work/Cell# _____ Email _____

Primary Employer _____ Years Employed? _____ Occupation _____

Personal Financial Information Assets _____ Liabilities _____ Net Worth _____

Do you have an Operating Line of Credit with a Financial Institution? (CIRCLE ONE) Yes No

Credit Limit _____ Current Balance _____

Gross Sales _____ Net Business Income _____ Other Income _____

Have you ever filed for bankruptcy? (CIRCLE ONE) Yes No If yes, Chapter _____ When? _____

Are there any unsatisfied judgements against you? (CIRCLE ONE) Yes No

**Required information*

CO-APPLICANT INFO

Co-Applicant Name _____ Co-Applicant SSN _____

Co-Applicant Home Address _____ City _____ State _____ Zip _____

DOB ____/____/____ Co-Applicant Phone # _____ Co-Applicant Email Address _____

Relationship with Primary Applicant _____ Employer _____ Years Employed? _____ Occupation _____

Have you ever filed for bankruptcy? (CIRCLE ONE) Yes No If yes, Chapter _____ When? _____

Are there any unsatisfied judgements against you? (CIRCLE ONE) Yes No

For a total credit limit greater than \$50,000 please complete the additional information below and submit your application as directed. If a Partnership, Corporation or LLC, include personal balance sheets with supporting schedules of the general partner, president, owner or managing member. Include any interest held by a co applicant, including spouse, if applicable.

TERMS AND CONDITIONS

BANK

Bank Name _____ Loan Officer _____

Address _____ City _____ State _____ Zip _____

Loan Acct # _____ Checking Acct # _____

Bank Phone # _____ Bank Fax # _____ Loan Officer # _____

TRADE

Name _____ Account # _____

Address _____ City _____ St _____ Zip _____

Contact _____ Phone # _____ Fax # _____

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EVERGRO FUEL CARD

Are you interested in an EverGRO Fuel Card? (CIRCLE ONE) Yes No

If yes, please specify how many EverGRO Fuel Cards you would like? _____

TERMS AND CONDITIONS

Permission from Individuals To Use Their Consumer Credit Reports: The undersigned hereby consent(s) to Creditor's (EverGRO Cooperative) use of a non-business consumer credit report on the undersigned in order to further evaluate the creditworthiness of the undersigned as principal(s), proprietor(s) and/or guarantor(s) in connection with the extension of credit as contemplated by this credit application. The undersigned hereby authorize(s) Creditor to utilize a consumer credit report on the undersigned from time to time in connection with the extension or continuation of the credit represented by this credit application. The undersigned as (an) individual(s) hereby knowingly consent(s) to the use of such credit report consistent with the Federal Fair Credit Reporting Act as contained in 15 U.S.C. et seq.

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 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.

CREDIT POLICY & TERMS

- The Credit Policy of the Creditor shall be extended 30 days' accommodation credit to approved costumers. No customer shall be extended additional credit if any portion of the account is over 60 days past due. At the discretion of the Creditor, new credit will only be extended after the customer pays the past due portion of the account in full.
- If this account is referred to an Attorney or Collection Agency for collection, the Customer agrees to pay, in addition to the balance due and the applicable FINANCE CHARGE, the maximum Attorney's fees, Collection Agency fees, and Court costs permitted by State law.
- The Creditor has the right to reduce the Credit Line and/or withdraw credit privileges at any time without prior notice, except as otherwise provided by law.
- Customer and Creditor may terminate this agreement at will as to future purchases. Customer certifies that the information given on this application is given to obtain credit and is true and correct.
- You may be asked to provide a copy of your driver's license or other identifying documents.
- SEE BELOW for the FINANCE CHARGES; INTEREST RATES; that apply for transaction in Virginia.

Finance Charge/Interest (Annual): **18%**

Finance Charge/Interest (Per Month): **1.50%**

Minimum Finance Charge: **\$1.00**

EverGRO Cooperative reserves the right to obtain additional financial information.

Creditor refers to EverGRO Cooperative.

For churches and non-profit please provide a resolution or other form of authorization from your board of directors or other governing body. Without this authorization EverGRO Cooperative will not be able to deliver by your location.

The preceding information has been supplied in order to establish credit. The EverGRO Cooperative Credit Department is authorized to investigate your credit worthiness, credit history, and financial responsibility with other creditors and banks, and credit reporting agencies. I/We hereby certify that all information provided in this application is true and correct.

Applicant: _____ Date: _____ Co-Applicant: _____ Date: _____

Applicant Printed Name: _____ Co-Applicant Printed Name: _____