



PO BOX 150, KILLDEER, ND 58640 Ph: (701) 764 -6791 Fax: 701-764-6795 (Office Admin)

CREDIT APPLICATION FOR BUSINESS

BUSINESS CONTACT INFORMATION			
Company Name:		Company Taxpayer ID Number:	
Company Contact:			
Phone:	Fax:	E-mail:	
Registered company address:			
City:		State:	ZIP Code:
Date business commenced:			
Sole proprietorship:	Partnership:	Corporation:	Other:
BUSINESS AND CREDIT INFORMATION			
Primary business address:			
City:		State:	ZIP Code:
How long at current address?			
Telephone:	Fax:	E-mail:	
Bank name:			
Bank address:		Phone:	
City:		State:	ZIP Code:
Type of account:	Savings	Checking	Other
CREDIT REFERENCES			
Company name:		Company contact:	
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
Company name:		Company contact:	
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
Company name:		Company contact:	
Address:			
City:		State:	ZIP Code:
Phone:	Fax:	E-mail:	
Type of account:			
PATRONAGE			
<p>The Applicant requests that Patronage Dividends be paid on their account: YES NO (Circle One)</p> <p>If YES, the Applicant consents that the Taxpayer ID number provided above is the correct Taxpayer Identification Number for the Applicant, and consents that the dollar value of any allocation received from Farmers Union Oil Company, with respect to patronage occurring during the current and subsequent taxable years of this cooperative, if the cooperative's financial condition permits any such allocation, be reported as Applicant income to the Internal Revenue Service.</p>			
AGREEMENT			
<p>The Undersigned agrees to pay this account IN FULL by the 30th of each month following purchase. In the event payment is not prompt, a monthly finance charge of 1.75 % will be added to the unpaid balance until paid. The applicant further agrees to pay all costs of collection, including reasonable fees, should that become necessary. By submitting this application, you authorize Farmers Union Oil Company to make inquiries into the banking and business/trade references that you have supplied. Credit limit will be established by Farmers Union Oil Company.</p>			
Signature: _____		Date: _____	