

PERHAM COOP CREAMERY CREDIT APPLICATION

Customer warrants that all the information submitted hereon is accurate and complete

PERSONAL / BUSINESS FACTS

NAME - LAST, FIRST OR BUSINESS SSN/EIN (TO OBTAIN CREDIT REPORT) DATE OF BIRTH PHONE NUMBER HOME OR BUSINESS

ADDRESS CITY STATE ZIP YRS HERE OWN OR RENT

BUSINESS CONTACT - PERSON - POSITION E-MAIL ADDRESS

PREVIOUS CUSTOMER YES OR NO UNDER WHAT NAME? LOCATION?

AMOUNT OF CREDIT NEEDED, AND FOR WHICH COMMODITIES (CIRCLE ALL THAT APPLY)

\$ LP BULK PETROLEUM FEED CONVENIENCE STORE AGRONOMY OTHER

EMPLOYMENT FACTS (see indemnification provision on the reverse side of this application)

EMPLOYER NAME AND ADDRESS YRS HERE POSITION MO. INCOME PHONE NUMBER

OTHER INCOME \$ SOURCE You do not have to list income from a spouse or former spouse including alimony, child support or maintenance unless you want us to consider it for the purpose of opening this account. If you do list such payments. Please complete co-applicant section below.

CREDIT/BANK REFERENCES (See indemnification provision on the reverse side of this application)

NAME, ADDRESS, PHONE NUMBER

CO-APPLICANT COMPLETE THIS PART ONLY IF: 1) Another person will use the account. Such person must also sign this application and will be jointly obligated on the account. Or 2) you are relying on income derived from a spouse or former spouse including child support, alimony or maintenance payments for repayment of the account.

NAME - LAST, FIRST, INITIAL SSN(to obtain credit report) DATE OF BIRTH RELATIONSHIP

ADDRESS CITY STATE ZIP YRS HERE PHONE NUMBER

EMPLOYER NAME AND ADDRESS YRS HERE POSITION MO. INCOME PHONE NUMBER

CREDIT/BANK REFERENCES (if different from applicant's)

MN SALES TAX EXEMPTION Yes or No CIRCLE REASON CODE. ENTER NUMBER OR TITLE WHERE APPLICABLE.

A - Agricultural or Industrial production

B - Direct pay. Enter dp# _____

C - Exempt Organization. Enter ES# or type of group _____

D - Motor Carrier Direct Pay. Enter MCDP# _____

E - Percentage Exemption. Advertising _____ % Utilities _____ %

F - Resale

G - Resource Recovery Facility. Enter CN# _____

H - Services (Multiple Points of Use)

I - Other. Enter Title _____

Single purchase certificate or Blanket certificate (if circled, this certificate continues in force until canceled by the purchaser)

Signature of Authorized Purchaser

WOULD YOU LIKE TO RECEIVE COPIES OF THE COOP'S ARTICLES AND BYLAWS? YES OR NO

NOTICE: Please review the reverse side of this page, and any attached pages, before signing.

I understand that you will retain this application whether or not it is approved. You are authorized to check my employment and credit history, and to answer questions about your credit experience with me. I agree to abide by all the terms of the Coop's credit plan and policy.

APPLICANT'S SIGNATURE DATE CO-APPLICANT'S SIGNATURE DATE

PERHAM COOP CREAMERY CREDIT AGREEMENT

P O Box 247, PERHAM, MN 56573

Telephone: (218) 346-6240 Fax: (218) 346-6241

Perham Locations

Fertilizer (218) 346-6345
Oasis/Budget Host (218) 346-7810
Bulk-LP/Gas/Diesel (218) 346-3500
Country Store/Feed (218) 346-7075
Meat Market & Locker (218) 346-6245

Other Locations

Battle Lake Coop (218) 864-5574
Vergas Country Store (218) 342-2441
Menahga & Park Rapids Area (800) 959-6987

CONSENT TO DECLARATION OF PATRONAGE REFUNDS

By signing this agreement, I hereby consent to include in my gross income (or the gross income of the entity that I sign this form on behalf of), as now or hereafter provided in the federal income tax laws, the stated dollar amount of each written notice of allocation which I or it receives from the Perham Coop Creamery Assn., with respect to my or its patronage occurring during the current and all subsequent taxable years of this cooperative. This individual consent shall be revocable by me or it at any time if in writing.

RECOVERY OF ATTORNEY FEES & COLLECTION COSTS

In the event the Co-op initiates collection proceedings to collect amounts due on open account for agricultural or commercial purchases, all costs of collection and reasonable attorneys' fees incurred or paid by the Co-op in order to collect the amount due shall be added to the amount due and paid by Customer unless prohibited by law. This agreement applies to all unpaid charges incurred prior to the date of the agreement and all future charges.

INDEMNIFICATION OF CO-OP FOR INQUIRING WITH EMPLOYMENT/BANK/CREDIT REFERENCES

The applicant shall indemnify and hold the Co-op harmless from any claims, damages, etc., brought by anyone including applicant, including the cost of legal defense, for making inquiry into and with any references furnished by the applicant. The applicant also hereby grants permission to any reference above named to answer any questions posed to it by the Co-op, and the applicant shall indemnify and hold that reference harmless to the same extent as the applicant indemnifies and holds the Co-op harmless. The Co-op shall also be held harmless from the receipt and use of credit reports about the applicant or the applicant's guarantor.

