

**Falmouth Cooperative Company  
Credit Application and Agreement**

*\*\*Please Answer All Questions\*\**

**General Information:**

Individual's Legal First Name: \_\_\_\_\_ MI \_\_\_\_\_ Last Name:  
\_\_\_\_\_

Business Name (if different from above): \_\_\_\_\_

Applicant Phone: \_\_\_\_\_

Social Security or Employer Identification Number (EIN) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Driver's License # \_\_\_\_\_ State \_\_\_\_\_

Applicant  
Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
—

Yrs. at present address \_\_\_\_\_ Rent \_\_\_\_\_ Own \_\_\_\_\_ Buy \_\_\_\_\_ Applicant

Email: \_\_\_\_\_

**Work History - Applicant**

Employer \_\_\_\_\_ Phone: \_\_\_\_\_ Yrs. of Employment \_\_\_\_\_

Position: \_\_\_\_\_ Present Annual Earnings: \$ \_\_\_\_\_

**Other:**

Trade Reference #1 (name & phone) \_\_\_\_\_

Trade Reference #2 (name & phone) \_\_\_\_\_

Trade Reference #3 (name & phone) \_\_\_\_\_

Tell us how the account will be used (select one):

Agriculture Use \_\_\_\_\_ Commercial Use \_\_\_\_\_ Personal/Consumer Use \_\_\_\_\_  
(If Agriculture Use, please complete MI Sales and Use Tax Exemption Certificate)

Amount of credit needed monthly: \_\_\_\_\_

If applying for a "Fuel Card", provide us with a four digit pin # \_\_\_\_\_. Number of cards \_\_\_\_\_.

Upon completion, please return to FALMOUTH COOPERATIVE COMPANY, 260 E. Prosper Rd. PO Box 85, Falmouth 49632 or fax to 231-826-4250.

**FOR CREDIT DEPARTMENT USE ONLY**

Information requested by: \_\_\_\_\_ Division: \_\_\_\_\_

Credit Decision: Approved      Not Approved

Comments: \_\_\_\_\_

By: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_

**CREDIT TERMS:**

Applicant hereby requests credit terms and agrees to the established limits and conditions of such terms. These terms include the payment of all charges by the 20<sup>th</sup> day of the month that follows the purchase month. Applicant agrees to make payments as necessary to keep the account balance within credit limits and terms. Payments not made within terms will be assessed a 2% finance charge each subsequent month the account remains past due. Should litigation become necessary to collect a delinquent account, applicant further agrees to pay Falmouth Cooperative Company legal fee(s).

It is understood and agreed between the parties that this agreement does not constitute any obligation on the part of Falmouth Cooperative Company and credit privileges may be cancelled at any time.

If applicable, all new accounts are required to complete the appropriate sales tax exemption certificate.

This agreement shall be governed by and enforced in accordance with the laws of the State of Michigan.

By execution of this agreement, the parties consent to venue of Missaukee County, Michigan of any action brought to enforce the terms of this agreement or to collect any monies due under it.

It is understood and agreed between the parties that this agreement is binding upon the heirs, personal representatives, legal representatives, successors and assigns of the parties.

I hereby authorize all of my creditors to release to Falmouth Cooperative Company whatever information may be contained in their files pertaining to business and personal dealings with me. This may include, but is not limited to, a consumer credit report.

**Certification:**

I certify the information on this form is correct and if approved for credit, acknowledge and agree to pay my account within the established terms and conditions of the Falmouth Cooperative Company.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PRIVATE

GUARANTY

The undersigned represents and warrants to Falmouth Cooperative Company, Inc., a Michigan corporation (Creditor), that the undersigned is an Officer, Member, Shareholder or Partner of \_\_\_\_\_ ("Debtor"). For valuable consideration, including but not limited to Creditor's extension of credit to Debtor and as security for the performance of Debtor's obligations, the undersigned, in their individual capacity and not as an officer/member/shareholder/partner of Debtor and with full knowledge of Creditor's reliance on this Guaranty, hereby guarantees to Creditor, including Creditor's successors and assigns, the prompt and full payment of Debtor's obligations including, without limitation, the payment of all costs and expenses (including attorneys' fees) reasonably incurred by Creditor in the enforcement of its rights under the Credit Application and/or this Guaranty. This Guaranty shall be a continuing guaranty until all of the Debtor's obligations to Creditor are fully paid, satisfied, and discharged; it is agreed that the liability of Guarantor(s) shall be direct and not conditional or contingent on the pursuit of any remedies made against Debtor; and that liability of Guarantor(s) is joint and several.

The undersigned has caused this Guaranty to be executed on the date set forth below.

Guarantor:

Dated: \_\_\_\_\_

\_\_\_\_\_

Print name \_\_\_\_\_

Guarantor:

Dated: \_\_\_\_\_

\_\_\_\_\_

Print name \_\_\_\_\_