



EFFINGHAM EQUITY CREDIT APPLICATION AND CREDIT POLICY FOR AGRICULTURE

Fill out completely.

PRIMARY APPLICANT				
Full Legal Name of Individual or Entity		SS # or Tax ID #	Date of Birth or Entity Formed	Phone Number
Billing Address	City	State	Zip Code	Email Address
Applicant is: <i>(check one)</i>				
<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> LLC <input type="checkbox"/> Other: _____				
CO APPLICANT OR OFFICER OF ENTITY				
Legal Name of Individual		Social Security Number	Date of Birth	
Address	City	ST	Zip	Phone No.
OTHER INDIVIDUALS AUTHORIZED TO CHARGE				
Name / Title		Name / Title		Name / Title
FINANCIAL INFORMATION				
Operating Lender Name	Location	Loan Officer	Credit Limit	Outstanding Balance
			\$	\$
Operating Lender Name	Location	Loan Officer	Credit Limit	Outstanding Balance
			\$	\$
FARM INFORMATION				
Acres Farmed	Acres Owned	Acres Rent/Share Crop	Off Farm Income	Source
			\$	
Dairy Herd Size	Milk Production (avg. #/month)	Annual Beef Sales	Annual Swine Sales	Other Business
	\$	\$	\$	\$
TRACE REFERENCES: List all current and previous input suppliers (feed, seed, chemical, fertilizer, etc.)				
Reference 1				
Reference 2				

CREDIT AGREEMENT: Your signature(s) below mean(s) that in consideration of Effingham Equity extending credit to you, you agree to the following terms of this agreement upon Effingham Equity's approval of and in reliance upon this application of credit:

1. Effingham Equity will assign you a maximum credit line and has the right to reduce or withdraw your credit privileges under this CREDIT AGREEMENT at any time without prior notice, except as otherwise provided by law.
2. Effingham Equity may permit you to purchase goods and/or services from an Effingham Equity outlet on credit up to your credit line. You agree that said purchases will be governed by the terms of this CREDIT AGREEMENT.
3. Invoices will be issued by Effingham Equity for purchases made under this CREDIT AGREEMENT. Payment of the purchase price shall be made pursuant to the terms set forth on each invoice. Effingham Equity may require you to sign the invoice at the time of ordering a credit purchase or at the time of delivery of the goods or services ordered. You will be liable to Effingham Equity for payment in accordance with the terms of the invoice whether or not you in fact sign the invoice. The note of delivery shall be deemed to be the note of invoice for purposes of payment and assessment of FINANCE CHARGES.
4. If you fail to pay Effingham Equity in accordance with this CREDIT AGREEMENT Effingham Equity has the right, subject to any right you have by law, to collect your default, to declare the entire balance of your account immediately due and payable. If any unpaid balance is referred to an attorney for collection, you will pay to the extent permitted by law, reasonable attorney's fees if the attorney is not our salaried employee, all costs and accrued FINANCE CHARGES on said unpaid balance in accordance with the FINANCE CHARGE RATE SCHEDULE and ACCOUNT DISCLOSURE STATEMENT. A FINANCE CHARGE will be computed on statement date on any invoices which falls in a past due position on the monthly closing date. The FINANCE CHARGE begins to accrue the day after the due date of the invoice. The FINANCE CHARGE is computed monthly on the outstanding balance past due after all payments and credits received by the closing date of the statement have been deducted. The FINANCE CHARGE will be computed based on the following rates, but no higher than maximum rate allowed by law, which are subject to change with proper notice to you.

My/our signature on this CREDIT AGREEMENT and use of the account constitutes my/our consent to the terms and conditions of the account and the CREDIT AGREEMENT. Everything I/we have stated in this application is correct to the best of my/our knowledge. You are authorized to check my/our credit and employment history, to answer questions about your credit experience with me/us, and to confirm the information on this application with my/our bank or any credit reporting agency. I/we hereby acknowledge receipt of a copy of this CREDIT AGREEMENT.

DATED: _____ SIGNED: _____

DATED: _____ SIGNED: _____

Co-Applicant

DO NOT WRITE BELOW THIS LINE

REV. AG
ACCOUNT
06/2018

OFFICE USE ONLY	ACCOUNT #	CREDIT CODE	CREDIT \$	APPROVAL DATE	CREDIT REPORT