

**PRIMARY APPLICANT INFO (TELL US WHO YOU ARE)**

\*Customer/Applicant Name/Business Name \_\_\_\_\_ \*Customer SSN/EIN \_\_\_\_\_

\*Applicant Home Address/Business Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Type of Business:  Proprietorship  General Partnership  Ltd Partnership  Corporation  LLC \*Date of Birth \_\_\_\_\_

P.O. Box if Different from Physical \_\_\_\_\_ County \_\_\_\_\_ Primary Type of Farming \_\_\_\_\_

Home/Phone # \_\_\_\_\_ Work/Cell # \_\_\_\_\_ Email Address \_\_\_\_\_

Primary Employer \_\_\_\_\_ How long employed here \_\_\_\_\_ Occupation \_\_\_\_\_

Personal Financial Information Assets \_\_\_\_\_ Liabilities \_\_\_\_\_ Net Worth \_\_\_\_\_

Do you have an Operating Line of Credit with a Financial Institution?  Yes  No Credit Limit: \_\_\_\_\_ Current Balance: \_\_\_\_\_

Gross Sales \_\_\_\_\_ Net Business Income \_\_\_\_\_ Other Income \_\_\_\_\_

Have you ever filed for bankruptcy?  Yes  No If yes, Chapter \_\_\_\_\_ When? \_\_\_\_\_ Are there any unsatisfied judgements against you?  Yes  No

\*required information

**CO-APPLICANT INFO**

Co-Applicant Name \_\_\_\_\_ Customer SSN \_\_\_\_\_

Co-Applicant Home Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_

Co-Applicant Phone # \_\_\_\_\_ Co-Applicant Email Address \_\_\_\_\_

Relationship with Primary Applicant \_\_\_\_\_ Employer \_\_\_\_\_ Years employed here? \_\_\_\_\_ Occupation \_\_\_\_\_

Have you ever filed for bankruptcy?  Yes  No If yes, Chapter \_\_\_\_\_ When? \_\_\_\_\_ Are there any unsatisfied judgements against you?  Yes  No

Permission from Individuals To Use Their Consumer Credit Reports: The undersigned hereby consent(s) to Creditor's\* (Southern States Cooperative, Inc.) 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 authorizes(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. 1682 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 customers. 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 THE TABLE BELOW for the FINANCE CHARGES; INTEREST RATES; COLLECTION COSTS & FEES; that apply for commercial transaction in each state.

Commercial Rates For Each State	AL	DE	FL	GA	KY	MD	NC	SC	VA	WV
Finance Charge/Interest (Annual):	18%	18%	18%	16%	18%	18%	16%	18%	18%	18%
Finance Charge/Interest (Per Month):	1.50%	1.50%	1.50%	1.33%	1.50%	1.50%	1.33%	1.50%	1.50%	1.50%
Minimum Finance Charge:	\$0.50	\$ -	\$ -	\$ -	\$0.50	\$ -	\$ -	\$ -	\$0.50	\$0.50

Southern States Cooperative, Inc. reserves the right to obtain additional information as needed.

\*Creditor refers to Southern States Cooperative, Inc.

The preceding information has been supplied in order to establish credit. The Southern States 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: \_\_\_\_\_

**"Stop here if your requested credit line is under \$50,000."**

PLEASE COMPLETE THIS PAGE FOR CREDIT LIMITS UP TO \$50,000

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.

BANK

**REFERENCES**

Bank Name \_\_\_\_\_ Loan Officer \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
 Loan Acct # \_\_\_\_\_ Checking Acct # \_\_\_\_\_  
 Bank Phone # \_\_\_\_\_ Bank Fax # \_\_\_\_\_ Loan Officer Phone # \_\_\_\_\_

Name \_\_\_\_\_ Account # \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
 Contact \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Name \_\_\_\_\_ Account # \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
 Contact \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Name \_\_\_\_\_ Account # \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_  
 Contact \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

TRADE

**CROP PRODUCTION INFORMATION**

Owned Acres \_\_\_\_\_ Rented Acres \_\_\_\_\_  
 Crops            Corn            Soybean            Wheat            Other \_\_\_\_\_ Other \_\_\_\_\_ Other \_\_\_\_\_ Other \_\_\_\_\_  
 Planted Acres    \_\_\_\_\_            \_\_\_\_\_            \_\_\_\_\_            \_\_\_\_\_            \_\_\_\_\_            \_\_\_\_\_  
 C/I Requested    \_\_\_\_\_            \_\_\_\_\_            \_\_\_\_\_            \_\_\_\_\_            \_\_\_\_\_            \_\_\_\_\_  
 Are your Crops Irrigated?  Yes or  No    If Yes, what percentage? \_\_\_\_\_    Do you Double Crop?  Yes or  No

PLEASE COMPLETE THIS PORTION FOR CREDIT LIMITS OVER \$50,000

**LIVESTOCK PRODUCTION INFORMATION**

Number of Breeding Stock    Sow \_\_\_\_\_            Beef Cattle \_\_\_\_\_            Dairy Cattle \_\_\_\_\_            Poultry \_\_\_\_\_

Assets/Liabilities Sheet Attached separately

<b>ASSETS</b>		<b>LIABILITIES</b>	
Balance Sheet Date _____		CCC loans	\$ _____
Cash, Checking, Savings	\$ _____	Operating Principal	\$ _____
Securities	\$ _____	Accounts Payable	\$ _____
Accounts Receivable	\$ _____	Current Intermediate Debt	\$ _____
Investment in Growing Crop	\$ _____	Current Long-Term Debt	\$ _____
Feed & Grain Inventory	\$ _____	Leases	\$ _____
Market Livestock	\$ _____	Misc. Current Liabilities	\$ _____
Government Payments Receivable	\$ _____	Specify _____	\$ _____
Other Current Assets	\$ _____		
Specify _____			
<b>Total Current Assets</b>	<b>\$ _____</b>	<b>Total Current Liabilities</b>	<b>\$ _____</b>
Breeding Livestock	\$ _____	Notes Payable - Specify _____	\$ _____
Machinery & Equipment	\$ _____	Machinery & Equipment Loans	\$ _____
Vehicles	\$ _____	Vehicle Loans	\$ _____
Other Intermediate Assets	\$ _____	Other Intermediate Debt	\$ _____
Specify _____		Specify _____	
<b>Total Intermediate Assets</b>	<b>\$ _____</b>	<b>Total Intermediate Liabilities</b>	<b>\$ _____</b>
Real Estate Value	\$ _____	Mortgage Loans	\$ _____
Buildings	\$ _____	Other Long-Term Debt	\$ _____
Other Long-Term Assets	\$ _____	Specify _____	\$ _____
Specify _____			
<b>Total Long-Term Assets</b>	<b>\$ _____</b>	<b>Total Long-Term Liabilities</b>	<b>\$ _____</b>
<b>TOTAL ASSETS</b>	<b>\$ _____</b>	<b>TOTAL LIABILITIES</b>	<b>\$ _____</b>

Applicants may be required to verify income information. (via tax return or profit and loss)

The preceding information has been supplied in order to establish credit. The Southern States 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: \_\_\_\_\_