



CREDIT APPLICATION

Application is hereby made for the extension of credit:

NAME OF BUSINESS/APPLICANT: _____

FEDERAL TAX ID#/SS#: _____ RESALE #: _____

BUSINESS ADDRESS: _____

Do you rent? _____ Own? _____

If premises are rented, supply name and address of landlord: _____

BUSINESS PHONE NUMBER: _____

FORM OF BUSINESS:

- Proprietorship/Sole Owner
- Corporation (State _____ Date of Incorporation _____)
- Partnership
- Limited Liability Company (State _____ Date of Incorporation _____)
- Other _____

BILLING ADDRESS (if different from above) _____

COMPLETE IF CORPORATION:

Corporate Name: _____

Provide name, address, telephone number and social security number for the following:

President: _____

Vice President: _____

Secretary: _____

Treasurer: _____

COMPLETE IF INDIVIDUAL OR PARTNERSHIP: (If Partnership, list all general partners)

Provide name, address, telephone number and social security number for the following:

Principal/Owner/Partner: _____

Principal/Owner/Partner: _____

Principal/Owner/Partner: _____

FINANCIAL INFORMATION:

Bank 1) _____

Branch Location _____ Name of Banker _____

Address _____ City/State/Zip _____

Telephone _____ Fax _____

Account Number _____ Type of Account _____

Person(s) Authorized to Sign Checks _____

Bank 2) _____

Branch Location _____ Name of Banker _____

Address _____ City/State/Zip _____

Telephone _____ Fax _____

Account Number _____ Type of Account _____

Person(s) Authorized to Sign Checks _____

Have you or any of the other principals in your organization participated in either a corporate or personal bankruptcy in the last five (5) years? Yes No

If Yes, please explain _____

Are you a former customer? Yes No

If Yes, dates: From _____ to _____

Previous account name _____

Address _____

Location _____

How long at this location by this ownership? _____ If less than one year, list previous business owned/leased or employment history: _____

TRADE REFERENCES:

Name 1) _____

Contact _____

Address _____

Phone number _____ Fax number _____

Name 2) _____

Contact _____

Address _____

Phone number _____ Fax number _____

Name 3) _____

Contact _____

Address _____

Phone number _____ Fax number _____

Name 4) _____

Contact _____

Address _____

Phone number _____ Fax number _____

PURCHASING INFORMATION

Please provide names of individuals authorized to make purchases and limits, if any:

Name Amount Authorized to Purchase

Name Amount Authorized to Purchase

Name Amount Authorized to Purchase

Name Amount Authorized to Purchase

Is a purchase order number required on invoices? _____

Agreement:

“Applicant hereby applies to Agrecol Corporation (“Creditor”) to open a commercial charge account in Applicant’s name and hereby requests Creditor from time-to-time to extend credit to enable Applicant to purchase merchandise from Creditor for business or commercial purposes only. As an inducement to Creditor to extend credit and in consideration of Creditor agreeing to extend credit to Applicant, Applicant states and agrees as follows:

Applicant represents and warrants that (a) all information given in connection with this Application and Agreement (“Agreement”) is true as of the date thereof, and (b) that it is financially able to comply with all payment terms specified herein or in any invoice from Creditor (“Payment Terms”), and such representation and warranty shall be deemed remade each time Applicant accepts credit from Creditor.

Payments are to be sent directly to: 2918 Agriculture Drive, Madison, WI 53718 in accordance with Payment Terms that are granted to Applicant by the Creditor/Credit Department.

If Applicant does not pay an invoice or billing in full upon receipt of the same, or within the terms noted therein, Creditor may charge a service charge/finance charge against the unpaid balance of the invoice or billing (“Balance”) from the date of the invoice at the rate of 18 percent per year (which is 1.5% percent per month) on the unpaid Balance until the Balance and all interest charges accumulated on the balance are paid in full. Any payments made by applicant shall first be applied against any interest accumulated on the outstanding Balance and then against the Balance. Creditor may add any accumulations of interest which are unpaid for 30 days to the Balance and that sum will be the new Balance owed by Applicant and against which interest may be charged.

Creditor may at any time require Applicant to make any and all additional purchases on a cash basis and require Applicant to satisfy all its debts to Creditor before making any additional purchases or refuse to make further extensions of credit while any Balance remains unpaid.

Applicant agrees to pay a service charge of \$25.00 for any checks returned from the Applicants bank as unpaid for any reason. Creditor shall have the right to demand payment of the returned check(s) in CASH or CERTIFIED funds or MONEY ORDER immediately.

This Agreement shall be a continuing agreement and shall apply to each purchase of merchandise for which the Applicant does not pay in full at the time of delivery.

Creditor may terminate the Agreement or restrict or withhold deliveries to Applicant at any time without notice.

Applicant will pay all costs, expenses and collection charges (including attorney’s fees or charges made by any agent or collection agency used for purposes of collecting any unpaid Balance, which sum shall not be less than 28% of the unpaid Balance) incurred by Creditor in the enforcement of this Agreement and the collection of any charges due hereunder. Applicant also agrees to pay all pre and post-judgment costs including any costs, attorney’s fees or expenses incurred in the defense of any claim asserted by Applicant against Creditor.

Applicant agrees to notify Creditor by certified mail of any changes of ownership of the Customer and further agrees to be liable for all purchases should Applicant fail to comply with said notification. In the event that this Agreement is executed by more than one person, then, in such event the liabilities and obligations of the undersigned hereunder shall be joint and several and the relative words herein shall be read as if written plural.

If any portion or provision of this agreement shall be deemed to be unenforceable or void under applicable law, such term or provision shall not affect the remainder of the Agreement, all of which terms shall remain fully enforceable.

This information is given in strict confidence for the sole purpose of establishing an open account with Creditor. I (We) hereby authorize Creditor to request and obtain credit information from any trade, bank or financial references concerning the status of my business and credit.

Signature(s) of Applicant(s):

Owner/Officer _____ Title _____ Date _____
Print Name _____

Owner/Officer _____ Title _____ Date _____
Print Name _____

Owner/Officer _____ Title _____ Date _____
Print Name _____

Owner/Officer _____ Title _____ Date _____
Print Name _____

ALL ACCOUNTS ARE C.O.D. UNTIL OPEN ACCOUNT TERMS ARE APPROVED BY THE CREDIT DEPARTMENT. SALES AND USE TAX IS CHARGED ON ALL PURCHASES UNTIL A COMPLETED EXEMPTION CERTIFICATE HAS BEEN PROVIDED TO CREDITOR.

PERSONAL GUARANTY:

FOR VALUE RECEIVED and in consideration of any extension of credit or other financial accommodation heretofore or hereafter at any time made or granted to Applicant by Creditor, the undersigned hereby unconditionally guarantee(s) the full and prompt payment when due, whether by acceleration or otherwise, of all amounts Applicant shall at any time owe to Creditor, howsoever created, arising or evidenced, (collectively the "Liabilities"), and the undersigned further agree(s) to pay all interest on such Liabilities, plus all expenses (including attorneys' fees, legal expenses or collection charges as set

forth in the Agreement) paid or incurred by Creditor in endeavoring to collect the Liabilities, or any part thereof, and enforcing this personal guaranty. This personal guaranty shall be a continuing guaranty, and shall remain in effect (notwithstanding, without limitation, the death, incompetency or dissolution of any of the undersigned), subject to revocation as to any of the undersigned only upon actual receipt by the Creditor of written notice from such revocation: provided, however, that no such notice of revocation shall affect or impair any of the agreements and obligations of such undersigned hereunder with respect to any and all Liabilities existing prior to the time of actual receipt of such notice by Creditor or to obligations contracted for prior to such revocation but not yet delivered to Applicant.

Notices of every kind or nature, including but not limited to, notice of acceptance of this personal guaranty and notice of default or of non-payment on any of the Liabilities are hereby waived. This personal guaranty of payment is absolute and unconditional. The undersigned hereby consents and agrees that the Creditor may, from time-to-time, extend the time of payment of the whole or any part of any sum due and that extensions and renewals shall not, in any way, change, release or discharge the undersigned from this personal guaranty. The liability of the undersigned shall not be affected, impaired or diminished by any failure or omission on the part of the Creditor to realize upon any security, to be proceed against Applicant to enforce payment or to proceed under or upon any other guaranty to secure said sum.

This personal guaranty shall be construed according to the laws of the State of Wisconsin. This Agreement shall inure to the benefit of Creditor, its successors and assigns, and the assignees of any Liabilities hereby granted. It shall bind the undersigned, and their heirs, successors, legal representatives or assigns of the undersigned. If more than one party shall execute this personal guaranty, the term "undersigned" as used herein shall mean all parties executing this personal guaranty and each of them, and all such parties shall be jointly and severally obligated hereunder.

SIGNED AND DELIVERED THIS _____ DAY OF _____, 20_____.

Signature _____

Print Name Home Address

Signature _____

Print Name Home Address

Signature _____

Print Name Home Address

Signature _____

Print Name Home Address