

PRODUCTS PLANNING TO PURCHASE:

APPLICATION FOR CREDIT

CHS Northwest

a division of CHS Inc. ("CHS") 402 Main St. Lynden WA 98264 P: 360.354.2108 F: 360.354.3936 Email: CO-Lyndenmaincustomercare@chsinc.com

| | For | Office | Use | Only |
|--|-----|--------|-----|------|
|--|-----|--------|-----|------|

Credit Limit \$_____ Approval/Denial_____

Date

Patron #

| Energy | | Agronomy | n 🗆 Re | etail | | | | CR | EDI | T REQUESTED: \$ | \$ | | | |
|--|---|----------------|---------------------|--|-----------------------------|-------|--|------------|-------|------------------------|--------------|-----------|----------------|-----|
| INDIVIDUAL: (As | record | ed with IRS) | | | | | | | | | | | | |
| Last Name: | record | eu with ittoj | First Name | | | Mic | ldle Name: | | | Social Security I | Number: - | Date | of Birth: / | 1 |
| Mailing Address: | | | | | | | | Cit | y: | _ | State: | Zip: | | |
| Delivery Address: | (if differ | rent) | | | | | | Cit | y: | | State: | Zip: | | |
| Phone: | | | Cell / F | ax No: | | | | Em | ail: | | | Acres | Farmed | d: |
| Present Employer | /Phone | Number | I | | thly Income (se income) | Do no | ot include | Em | erge | ency Contact Nam | e and Phor | ie | | |
| Years at Current Residence: | | Own | Rent | | /lortgage pay | /ment | :: \$ L | Leas | se pa | ayment: \$ | L F | Rent Paym | ent \$ | |
| CO-Applicant: (If | Applica | hle) | | | | | | | | | | | | |
| Last Name: | пррпоц | 1510) | First Name | : | | Mic | Idle Name: | | | Social Security N | lumber: - | Date o | f Birth: / | / |
| Address: | | | | | | | | Cit | y: | | State: | Zip: | | |
| Phone: | | | | Cell Ph | one / Fax: | | | | | Relationship to | Applicant: | | | |
| Bank Reference: Operating / Checking | Bank | Name: | | Contac | t Person: | | Location: (Cit | y/State) | | Phone: | | Fax: | | |
| Employer/Phone: | · · · · · · · · · · · · · · · · · · · | | | | | | Monthly Inco | me (Do | not i | include spouse in | come) | | | |
| BUSINESS: (As r | ecorde | d with IRS) | | | | | | | | | | | | |
| Legal Name: | | | | | | | | | | Contact Persor | ו: | | | |
| Physical Address | / PO Bo | x: | | | | | | Cit | y: | | State: | Zip: | | |
| Business Phone: | | | | Fax: | | | | | | Email: | | | | |
| Federal Tax ID Nu | ederal Tax ID Number: Tax Exem certificate) | | t #: <i>(Plea</i> : | #: (Please attach Type of Business: | | | ☐ Individual ☐ Partnership ☐ LLC ☐ ☐ Corporation - ** <i>Please attach articles</i> @ | | | | | | | |
| AUTHORIZED SI | GNER: | | | | | | | | | | | | | |
| If a business, are | you autł | horized signer | ? □ _{No} | □Yes | | Ple | ase Print Name | : | | | Title: | | | |
| BANK REFEREN | | | | | | | | | | | | | | |
| Operating Line: | | Name: | | Contac | t Person: | | Location: (Cit | y/State) | | Phone: | | Fax: | | |
| CREDIT / TRADE | REFER | | | | | | | | | | | | | j |
| Name: | | Accour | t No: | | Location: | | | Phon | e: | | Fax: | | | |
| Name: | | Accour | t No: | | Location: | | | Phon | e: | | Fax: | | | |
| GUARANTOR: (F | or Busir | ness Applican | ts) | | | | | | | | | | | |
| Last Name: | | | First Name | : | | Mic | ldle Name: | | | Social Security N - | umber: - | Date o | f Birth: / | / |
| Address: | | | | | | | | Cit | y: | | State: | Zip: | | |
| Home Phone Number: | | | Cell / F | ax No: | Relationship to A | | | Applicant: | | | | | | |
| Bank Reference: Operating / Checking | Bank | Name: | | Contac | et Person: | | Location: (Cit | y/State) | | Phone: | | Fax: | | |
| EACH OF THE UNDI AND CONTINUOUS | | | | | | | | | | | | | | PEN |

AND CONTINUOUS AND IS GIVEN TO INDUCE CHS TO EXTEND CREDIT TO THE APPLICANT(S). THIS PERSONAL GUARANTEE SHALL REMAIN EFFECTIVE UNTIL REVOKED BY THE UNDERSIGNED BY NOTICE IN WRITING TO CHS. HOWEVER, SUCH A REVOCATION SHALL BE EFFECTIVE ONLY TO AMOUNTS DUE WHICH ARISE OUT OF NEW CONTRACTS OR TRANSACTIONS ENTERED INTO MORE THAN 30 DAYS AFTER RECEIPT OF NOTICE BY CHS. SUCH NOTICE MUST BE GIVEN BY CERTIFIED MAIL TO CHS. AT ANY TIME CHS MAY, WITHOUT NOTICE, EXTEND CREDIT TO APPLICANT OR MODIFY, RENEW, EXTEND, OR COMPROMISE ANY INDEBTEDNESS' TAKE, SUBORDINATE, OR RELEASE ANY SECURITY INTERESTS; RELEASE APPLICANT OR ANY OTHER GUARANTOR FROM ANY LIABILITY FOR INDEBTEDNESS' TAKE, SUBORDINATE, OR RELEASE ANY SECURITY INTERESTS; RELEASE APPLICANT OR ANY OTHER GUARANTOR FROM ANY LIABILITY FOR INDEBTEDNESS' TAKE, SUBORDINATE, OR RELEASE ANY SECURITY INTERESTS; RELEASE APPLICANT OR ANY OTHER GUARANTOR FROM ANY LIABILITY FOR INDEBTEDNESS' TAKE, SUBORDINATE, OR RELEASE ANY SECURITY INTERESTS; RELEASE APPLICANT OR ANY OTHER GUARANTOR FROM ANY LIABILITY FOR INDEBTEDNESS' AND OTHERWISE DEAL WITH APPLICANT AND OTHER GUARANTORS IN ANY MANNER DEEMED FIT, WITHOUT WAIVING THE EFFECTIVENESS OF THIS PERSONAL GUARANTOR WAIVES PRESENTMENT, DEMAND, PROTESTS, AND NOTICE OF ANY KIND. IF THERE IS MORE THAN ONE GUARANTOR, THE OBLIGATIONS ARE JOINT AND SEVERAL. CHS MAY BRING A SEPARATE ACTION AGAINST ANY GUARANTOR WITHOUT FIRST PROCEEDING AGAINST THE APPLICANT, OR ANY OTHER PERSON OR SECURITY, AND WITHOUT PURSUING ANY OTHER REMEDY. IN ANY PROCEEDING TO INTERPRET OR ENFORCE THIS PERSONAL GUARANTEE, CHS SHALL BE ENTITLE TO RECOVER ALL OF ITS COSTS AND ATORNEY FEES FROM ANY PERSONAL GUARANTOR. ALL NOTICES REGARDING THIS PERSONAL GUARANTEE MUST BE SENT TO CHS AT 5500 CENEX DRIVE, ATTN MS 140, INVER GROVE HEIGHTS, MN 55077. YOU FURTHER ACKNOWLEDGE THAT YOU HAVE READ, UNDERSTAND AND ACCEPT THE TERMS OF THIS AGREEMENT INCLUDED ON PAGE TWO OF THIS APPLICATION. YOU AUTHER ACKNOWLEDGE THAT YOU HAVE READ, UNDERSTAND AND ACCEPT THE TERMS OF T

IF APPLICANT IS A BUSINESS, BY SIGNING BELOW, YOU ATTEST AND ACKNOWLEDGE THAT THE APPLICANT IS A VALID BUSINESS ENTITY AND YOU ARE AUTHORIZED TO MAKE THIS APPLICATION ON BEHALF OF THE APPLICANT AND THAT ALL INFORMATION SUBMITTED IS COMPLETE AND ACCURATE.

| Individual Signature | Business Signature | Title | Co-Applicant / Guarantor Signature |
|----------------------|--------------------|-------|------------------------------------|
| Date | Date | | Date |

FINANCIAL INFORMATION:

BALANCE SHEET AS OF ______ FOR ______ (NAME OF INDIVIDUAL OR BUSINESS) OR, PLEASE ATTACH YOUR MOST RECENT BALANCE SHEET. (NOTE: ALL INFORMATION MUST BE COMPLETED TO RECEIVE CONSIDERATION FOR ANY CREDIT LIMIT REQUESTS GREATER THAN \$10,000)

| ASSETS | DEBT & NET WORTH | |
|-----------------------------|---|----|
| CASH & INVESTMENTS | \$ ACCOUNTS PAYABLE | \$ |
| CROP INVENTORY TOTAL | NOTES DUE WITH BANK | |
| LIVESTOCK INVENTORY | CURRENT PORTION - TERM DEBT (DUE 1 YR.) | |
| PRE-PAID EXPENSES - CROPS | LAND RENT PAYABLE | |
| NOTES / ACCOUNTS RECEIVABLE | CREDIT CARD DEBT | |
| OTHER CURRENT ASSETS () | OTHER CURRENT DEBT (CONTRACT FOR DEED) | |
| TOTAL CURRENT ASSETS | \$ TOTAL CURRENT DEBT | \$ |
| MACHINERY & EQUIP. TOTAL | EQUIP. LOANS (NET OF CURRENT ABOVE) | |
| FARM REAL ESTATE | VEHICLE LOANS | |
| IRA'S & SECURITIES | REAL ESTATE LOANS (NET OF CURRENT) | |
| OTHER FIXED ASSETS () | | |
| TOTAL LONG TERM ASSETS | \$ TOTAL LONG TERM DEBT | \$ |
| TOTAL ASSETS | \$ TOTAL LIABILITIES | \$ |
| | NET WORTH | \$ |

1. IN THE AGREEMENT "YOU" AND "YOUR" IS THE APPLICANT(S), AND "WE", "US" OR "OUR" IS CHS.

- YOU AGREE TO PAY US FOR CREDIT EXTENDED ON THIS ACCOUNT PURSUANT TO THIS AGREEMENT, TOGETHER WITH ALL APPLICABLE CHARGES. YOU AGREE THAT THIS ACCOUNT SHALL **BE USED ONLY FOR BUSINESS OR AGRICULTURAL PURPOSES** AND NOT PRIMARILY FOR PERSONAL, FAMILY OR HOUSEHOLD PURPOSES.
- 3. YOU WILL RECEIVE A MONTHLY ACCOUNT STATEMENT SHOWING THE PURCHASES FOR THE PRIOR MONTH. YOU AGREE TO PAY THE ENTIRE BALANCE SHOWING ON YOUR ACCOUNT STATEMENT BY THE PAYMENT DUE DATE, AND YOU UNDERSTAND THAT WE MAY IMPOSE A **FINANCE CHARGE OF 1.5%** PER MONTH **(WHICH IS AN ANNUAL RATE OF 18%)**, OR AS APPLICABLE ACCORDING TO STATE LAW, IF ANY PORTION OF YOUR BALANCE REMAINS UNPAID BEYOND THAT DATE.
- 4. WE WILL SET YOUR CREDIT LIMIT AND THIS IS THE MAXIMUM AMOUNT YOU MAY CHARGE ON YOUR ACCOUNT. WE MAY REFUSE TO EXTEND ADDITIONAL CREDIT AT ANY TIME.
- 5. THE FINANCE CHARGE ON THE ACCOUNT IS COMPUTED BY ADDING THE BALANCE OUTSTANDING EACH DAY IN THE BILLING PERIOD DIVIDED BY THE NUMBER OF DAYS IN THAT PERIOD. THE BALANCE OUTSTANDING EACH DAY IS DETERMINED BY ADDING ANY PURCHASES AND CHARGES AND SUBTRACTING PAYMENTS AND CREDITS FROM THE BALANCE OUTSTANDING. THE MINIMUM CHARGE IS \$.50 PER MONTH. INTEREST MAY BE COMPOUNDED AT OUR DISCRETION IF PERMITTED BY LAW.
- 6. PAYMENTS SHALL BE APPLIED FIRST TO THE UNPAID FINANCE CHARGE, THEN TO THE REMAINING OUTSTANDING BALANCE.
- 7. IN THE EVENT THAT COLLECTION PROCEEDINGS ARE INSTITUTED TO COLLECT ANY BALANCE DUE, YOU AGREE TO PAY ALL COLLECTION COSTS, INCLUDING ATTORNEYS' FEES, LEGAL EXPENSES AND OTHER COSTS AND EXPENSES TO COLLECT ANY DEBT OR ENFORCE ANY RIGHT UNDER THIS AGREEMENT.
- 8. IF APPLYING FOR A JOINT ACCOUNT, YOU EACH AGREE TO BE BOUND BY THE TERMS OF THIS AGREEMENT AND SHALL BE JOINTLY AND SEVERALLY LIABLE FOR PAYMENT OF ALL PURCHASES MADE UNDER THIS AGREEMENT.
- 9. IF YOU: (A) FAIL TO MAKE A PAYMENT WHEN DUE; (B) BREACH ANY OBLIGATION UNDER THIS AGREEMENT; (C) MAKE ANY FALSE STATEMENTS TO US; OR (D) FURNISH ANY FALSE OR MISLEADING INFORMATION, WE MAY SUSPEND AT OUR OPTION; LIMIT, SUSPEND OR CANCEL YOUR ACCOUNT; ACCEPT LATE OR PARTIAL PAYMENTS WITHOUT LOSING ANY RIGHTS; REQUIRE THE IMMEDIATE PAYMENT OF THE OUTSTANDING BALANCE, INCLUDING FINANCE CHARGES AND OTHER FEES; OR TAKE ANY OTHER ACTION PERMITED BY LAW. TERMINATION DOES NOT AFFECT YOUR OBLIGATION TO PAY YOUR EXISTING BALANCE.
- 10. TO THE EXTENT PERMITTED BY LAW, IF ANY CHECK OR OTHER PAYMENT YOU PRESENT TO US IS RETURNED UNPAID, YOU MAY BE ASSESSED A DISHONORED PAYMENT FEE UNDER THIS AGREEMENT.
- 11. WE MAY CHANGE THE TERMS OF THIS AGREEMENT AT ANY TIME AND WILL NOTIFY YOU IN ADVANCE OF THE CHANGES IN WRITING. YOUR CONTINUED USE OF THE ACCOUNT WILL INDICATE YOUR ACCEPTANCE OF ANY CHANGE.
- 12. WE MAY FROM TIME TO TIME REQUEST INFORMATION FOR THE PURPOSE OF CONDUCTING A CREDIT REVIEW FOR INSURING PAYMENT, AND YOU AGREE TO FURNISH INFORMATION REQUESTED BY US WITHIN A REASONABLE PERIOD. FURTHER, YOU AUTHORIZE US TO INVESTIGATE YOUR CREDIT RECORD, AND YOU UNDERSTAND WE MAY OBTAIN A CREDIT REPORT. YOU AUTHORIZE US TO FURNISH INFORMATION ABOUT YOUR ACCOUNT TO CREDIT REPORTING AGENCIES AND OTHERS YOU LAWFULLY MAY RECEIVE IT. FURTHER, WE ARE AUTHORIZED TO CHECK YOUR CREDIT AND EMPLOYMENT HISTORY AND TO ANSWER QUESTIONS ABOUT YOUR CREDIT EXPERIENCE WITH US. YOU ALSO AUTHORIZE YOUR BANK/LENDING INSTITUTION TO PROVIDE A CREDIT REFERENCE AND YOUR CURRENT FINANCIAL STATEMENT TO US. IF REQUIRED, A PHOTOCOPY OF THIS CREDIT APPLICATION IS AUTHORIZATION FOR THE BANK AND TRADE REFERENCES TO PROVIDE NECESSARY CREDIT INFORMATION.
- 13. WE ARE NOT BOUND BY ANY NOTATION OF "PAID IN FULL" THAT ACCOMPANIES ANY PAYMENT IF THE PAYMENT IS NOT FOR THE TOTAL OUTSTANDING AMOUNT.
- 14. YOU AGREE TO NOTIFY US IMMEDIATELY OF ANY QUESTIONS ABOUT A STATEMENT OR CHANGE IN ADDRESS.
- 15. NO DELAY OR OMISSION TO EXERCISE RIGHTS WILL IMPAIR ANY SUCH RIGHTS OR WILL BE A WAIVER OF ANY DEFAULT OR RIGHTS.
- 16. FACSIMILE OR ELECTRONIC COPIES OF SIGNATURES SHALL BE DEEMED ORIGINAL SIGNATURES FOR ALL PURPOSES RELATED TO THE AGREEMENT.
- 17. WE ARE AUTHORIZED TO FILE AN AGRICULTURAL LIEN AS ALLOWABLE BY STATE LAW.
- 18. UNTIL NOTIFIED IN WRITING TO THE CONTRARY BY THE PATRON, CHS MAY ASSUME THAT THE PATRON'S SPOUSE, CHILDREN OVER THE AGE OF SIXTEEN YEARS, AND EMPLOYEE'S IF ANY, ARE AUTHORIZED TO PURCHASE GOODS OR SERVICES AND CHARGE THEM TO THE PATRON'S ACCOUNT.