Logo

Description automatically generated

**Return to:** [**nsnyder@agstate.org**](mailto:nsnyder@agstate.org) **or** [**tjohnson@agstate.org**](mailto:tjohnson@agstate.org)

**Credit Application** 2022

Account Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN/EIN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_**County**\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_ Zip Code:\_\_\_\_\_\_\_\_\_

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account Type:

\_\_\_\_ Agronomy \_\_\_\_ Petroleum \_\_\_\_ Feed \_\_\_\_ Grain \_\_\_\_ General \_\_\_\_

Are you applying for a fuel card: \_\_\_\_ Yes \_\_\_\_ No Number of Fuel Cards: \_\_\_\_\_ Pin Number? Yes \_\_\_\_ No \_\_\_\_\_

**Do you want your statements to be emailed in lieu of regular mail? Yes\_\_\_\_\_ No\_\_\_\_\_\_**

**Type of Entity**

\_\_\_\_ Individual / Sole Proprietor \_\_\_\_ C Corporation \_\_\_\_ S Corporation \_\_\_\_ Partnership \_\_\_\_ Trust/Estate

\_\_\_\_ Limited Liability Company (LLC) Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Individuals/Sole Proprietors – Complete the following**

Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How Long? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How Long? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Corporation, Partnerships, Trust/Estates, LLC, or Other – complete the following:**

Year Business Established / Date of Incorporation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Additional Proprietors, Partners, Officers, Executor, etc.*

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency

Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Continued on Back***

In recognition of the language and requirements mandated in Iowa Code Chapter 570A, I hereby consent for any financial institution, as defined in Iowa Code Section 570A.1, that holds information relating to my financial history, net worth, or line of credit, to divulge such information for the purposes of ensuring payment to AgState. I further consent that such financial institution and AgState may discuss and consider all my financial history and waive any privacy rights with respect to such financial information.

I hereby give authorization to AgState, to access and view my personal credit report and all my credit information. I understand that anytime a creditor accesses my credit report or information, it may affect my credit reporting status. This authorization is valid until terminated in writing by me. I understand if I terminate such authorization, AgState may decide to limit or terminate my credit agreement.

In the event of collection action becomes necessary to collect on your account, any and all costs incurred by, including collection service payments, court costs, and attorney fees will be applied to my account. If applying for a joint account; both of us agree to be jointly and severally liable for payment of all purchases made under this agreement.

Finance charges are applied on or about the 16th of each month. A 1.75% FINANCE CHARGE will be added to all past due accounts. This FINANCE CHARGE is equivalent to an ANNUAL PERCENTAGE RATE of 21%. Finance charges are computed on the unpaid balance of the previous billing cycle. The billing cycle closing date is the last day of each month.

To secure the payment of all sums that may become due under any charge account I may have with AgState, I grant a security interest in all of my inventory now owned or hereafter acquired; all accounts, deposit accounts, investment property, letter of credit rights, supporting obligations, now existing or hereafter arising, together with all interest I may have in any goods, the sale or lease of which give rise to any of my accounts, and all chattel paper, documents and instruments relating to accounts; all of my general intangibles, now owned or hereafter acquired; all of my equipment now owned or hereafter acquired and all of my farm products, including all crops and livestock, now owned or hereafter acquired, together with the proceeds, products, increase, issue, accessions, attachments, accessories, parts, additions, repairs, replacements and substitutes of, to, and for all of the foregoing with all such property called the “collateral”. I authorize to file any financing statement or other documents deemed necessary by to perfect or continue this security interest in the applicable filing office under the Uniform Commercial Code as adopted by the state of Iowa. Further, I agree to execute any additional documents deems necessary to perfect this security interest or to otherwise enforce rights may have as a secured party. In the event I fail to pay any sums when due, shall have all of the rights granted to a secured party under the Iowa Uniform Commercial Code and I agree the laws of the state of Iowa shall apply to any charge account I may have with AgState.

It is expressly agreed that a photocopy of this Authorization shall be as valid as an original.

## Signature: Printed Name: Date:

Co-applicant Signature: Printed Name: Date:

**Corporation, Partnership, Trust/Estate, LLC, or Other- Must Also Complete the Following: Personal Guaranty**

In consideration for the extension of credit to the Applicant of this Credit Application, (the “Applicant”)and other good and valuable consideration, and in order to induce additional extensions of credit to Applicant, Guarantor(s) hereby individually, joint and severally, absolutely, irrevocably, and unconditionally, guaranty to AgState, its successor and assigns the full and prompt payment of any and all amounts due and owing at the present time or that may hereafter be due and owing by Applicant to AgState. This guaranty shall continue in full force and effect until such time as the undersigned shall give written notice of revocations by registered mail. Such notice of revocation shall be ineffective as to any existing indebtedness or as to any transaction of commitment previously undertaken by you in reliance on such guaranty. This obligation shall cover the renewal of any claims guaranteed by this instrument or extensions of time of payment thereof, without further notice thereof to Guarantor(s). Guarantor(s) waive all other rights to notice and demand of any nature with respect hereto and agree to guaranty all amounts owed until such guaranty is terminated. Guarantor(s) agree to pay all costs associated with collecting any amounts due to AgState pursuant to this Credit Application, including attorney fees and court costs. This agreement shall be binding upon the parties hereto, their heirs, legal representatives, successors and assigns. I HAVE READ AND FULLY UNDERSTAND THE ABOVE, AS WELL AS ALL TERMS, LATE CHARGES AND LEGAL CONDITIONS CONTAINED HEREIN.

## Personal Guarantor Signature Printed Personal Guarantor Signature

Personal Guarantor Signature Printed Personal Guarantor Signature

Credit Approved Credit Declined Date By

5/2022