

# Valley Springs Farmers Coop

P.O. Box 100, 400 Broadway Ave. Valley Springs, SD 57068 605-757-6288

## Credit Application Agricultural

Full Name \_\_\_\_\_ Corporation or Partnership \_\_\_\_\_ Individual \_\_\_\_\_  
Current  
Address \_\_\_\_\_

Home Ph. \_\_\_\_\_ Cell Ph. \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

### CREDIT INFORMATION

Bank \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Banker's Name \_\_\_\_\_

Checking Account # \_\_\_\_\_ Savings Account # \_\_\_\_\_

Loan \_\_\_\_\_

### AGRICULTURE INFORMATION

No. of Acres Farmed \_\_\_\_\_

No. of Acres Owned \_\_\_\_\_

No. of Acres Rented \_\_\_\_\_

### PRODUCTION

#### CROPS: ACRES

Corn \_\_\_\_\_

Soybeans \_\_\_\_\_

Alfalfa \_\_\_\_\_

Other \_\_\_\_\_

#### LIVESTOCK: NUMBER OF HEAD

Dairy \_\_\_\_\_

Cattle \_\_\_\_\_

Swine \_\_\_\_\_

Poultry \_\_\_\_\_

Cow/Calf \_\_\_\_\_

Feed Lot \_\_\_\_\_

Farrowing \_\_\_\_\_

Finishing \_\_\_\_\_

Other \_\_\_\_\_

Total Credit Needed \$ \_\_\_\_\_

This is not a revolving account.

Everything that I/We have stated in this application is correct to the best of my/our knowledge. I/We understand that the Co-Op will retain this application whether or not it is approved. I/we authorize you to investigate my/our credit and employment history and to ask questions about their experience with me/us. I/We understand that if full payment is not made on or before the end of the month following date of the first statement for items purchased, the maximum legal finance charge will be charged on the unpaid balance. I/We understand that if it becomes necessary to take legal action for the collection of an account, reasonable attorney fees and/or court fees will be added to the balance due.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

Signature of Joint Applicant

Or signature of Spouse \_\_\_\_\_

Date \_\_\_\_\_