



Neerlandia Co-op

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CREDIT APPLICATION FORM

APPLICANT INFORMATION:

NAME _____

ADDRESS _____

_____ POSTAL CODE _____

TELEPHONE NUMBER _____

CREDIT REFERENCES:

BANK _____ ACCOUNT NUMBER _____

TRANSIT/BRANCH NUMBER _____

ADDRESS _____

_____ POSTAL CODE _____

TELEPHONE NUMBER _____

BUSINESS REFERNCES:

BUSINESS NAME	ADDRESS	PHONE NUMBER

I hereby make this application for the purpose securing credit from NEERLANDIA CO-OPERATIVE ASSOCIATION LTD. You have the right to make the usual credit inquiries about me from time to time including credit checks and credit bureaus and have consent to disclose information of a credit nature to persons or organizations with whom I have or expect to have financial dealings. It is agreed that on the last day of the month, service charges of 2% per month or (24% per year) shall be charged on unpaid balances of that month's statement. The NEERLANDIA CO-OPERATIVE ASSOCIATION shall have the right to alter the said rate on 30 days' notice. All information given in this agreement is true to the best of my knowledge.

MAXIMUM MONTHLY CREDIT REQUIRED? \$ _____

APPLICANT SIGNATURE _____ DATE _____

*FOR OFFICE USE ONLY: MEMBERSHIP NUMBER _____

MANAGER _____

