

# National Feed Commodities, Inc.

1407 Sparta Rd. Faucett, MO 64448

816-238-1920

Fax: 888-816-9163

## Credit Application

Please Print or Type.

Applicant: \_\_\_\_\_ Account #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ SSN # or Fed I.D. \_\_\_\_\_ Date of Birth : \_\_\_\_\_

Fax #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Please check the appropriate box.

Sole Proprietorship Partnership  Corporation  L.L.C.  (State Inc. \_\_\_\_\_)

If Partnership, Corporation or L.L.C. Please complete this section:

Officers or Owners:

Name	Address	City-State-Zip	% of Ownership or Title
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### Bank Reference:

Name of Bank : \_\_\_\_\_

Address: \_\_\_\_\_ City-State-Zip : \_\_\_\_\_

Bank Contact : \_\_\_\_\_ Telephone : \_\_\_\_\_

Account # : \_\_\_\_\_ Type of Account : Checking  Savings

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### Trade References (list three):

(1) Name: \_\_\_\_\_

Address: \_\_\_\_\_ City-State-Zip: \_\_\_\_\_

Telephone # : \_\_\_\_\_ Fax # : \_\_\_\_\_

(2) Name: \_\_\_\_\_

Address: \_\_\_\_\_ City-State-Zip: \_\_\_\_\_

Telephone # : \_\_\_\_\_ Fax # : \_\_\_\_\_

(3) Name: \_\_\_\_\_

Address: \_\_\_\_\_ City-State-Zip: \_\_\_\_\_

Telephone # : \_\_\_\_\_ Fax # : \_\_\_\_\_

Is there any litigation or administrative action against you that could significantly impact your balance sheet?

Yes  (please attach explanation) No

Amount of Credit you are requesting \$ \_\_\_\_\_

(Please attach latest financial statements if over \$ 10,000)

**By signing this application, Applicant(s) authorize the above named bank and trade references to release any credit information to National Feed Commodities, Inc. for the purpose of securing a credit line with National Feed Commodities, Inc. and understand that National Feed Commodities, Inc. may obtain any and all consumer reports necessary to process this application.**

**Terms & Conditions**

The undersigned authorize National Feed Commodities, Inc. to establish an account for the purpose of purchasing products and/or services from National Feed Commodities, Inc.

The undersigned are responsible for any and all charges to this account and must report any errors or discrepancies immediately to National Feed Commodities, Inc. All claims must be reported within 30 days. No claims will be accepted after 30 days. Terms of this account is the net amount due in 30 days. All amounts unpaid for more than thirty days will be subject to a service charge of 1.5% per month (18 % per annum). All accounts over 60 days old, the account will be placed on COD until such time the account is brought back to current terms and credit is reestablished. All accounts over 90 days old will be turned over to a collection agency and/or attorney for collection.

The undersigned agrees to make payment within the terms of this application. The undersigned agrees to pay charges for late payment of This account and further, if suit is required or an attorney retained to enforce collection, to pay all costs and expenses of collection including reasonable fees of an attorney and cost of suit, including appeals. If the credit applicant(s) shall, at any time, in the judgement of National Feed Commodities, Inc., become impaired, it is understood and agreed that National Feed Commodities, Inc. shall have the right to require payment in full at the time of placement of any order for merchandise, services, or any other thing of value provided by National Feed Commodities, Inc.. It is agreed that no salesperson, agent or employee of National Feed Commodities, Inc. has the authority to change in any manner the terms and conditions stated above.

Date: \_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Authorized Signature

**Please sign. Application will not be processed without signature (s)**

Credit shall not be extended until this application is approved by National Feed Commodities, Inc. in writing.

Reviewed By : \_\_\_\_\_

Approved: \_\_\_\_\_

Date Approved : \_\_\_\_\_