

BUSINESS ACCOUNT CREDIT APPLICATION AND AGREEMENT

1708 Pierce Ave, PO Box 254 Sibley, IA 51249-0254 admin@coopenergyco.com 800-342-7360

| Αp | | | | | _ Fuel/Gasoline | |
|----------------|-------------------------|---------------------------|----------------------------|----------------------|--------------------------------|---------------------------|
| ΑF | PPLICANT INFOR | MATION | | | | |
| | | BA's, divisions or subsid | | | Phone Number | |
| Street Address | | | | | State | |
| | | | | | State | |
| Вι | JSINESS INFORM | IATION | | | | |
| | Sole Proprietorship | Owner | | | SSN | |
| | Partnership | Partner | | | SSN | |
| | | Partner | | | SSN | |
| | Corporation / LLC | President / Mem | ber | | SSN | |
| | | Treasurer / Mem | ber | | SSN | |
| Fe | deral Tax No. (if appli | cable) | | Sales Tax Exc | emption Certificate Yes / | No (provide if available) |
| Es | stimated Annual Sales | s: | Person to cont | act about Accoun | t: | |
| Aı | mount of Credit Requ | ested: \$ | Type of Bu | siness: | How long in | n business: |
| BA | ANKING INFORMA | ATION | | | | |
| Ва | nk Name | | Bank Branch | | Bank Officer | |
| Ва | nk Address | | City | | State | Zip |
| Bank Phone # | | | Account Type | | | |
| l h | ereby authorize bank na | amed above to release inf | ormation requested for the | ne purpose of obtair | ning and /or reviewing credit. | (initial) |
| Tra | ade References | | | | | |
| | Name & Contact | | Complete Addres | S | Phone Number | |
| 1 | | | | | | |
| 2 | | | | | | |
| 2 | | | | | | |
| o | | | | | | |

Has applicant filed bankruptcy within the past seven years? No / Yes If yes, provide date of filing and location of filing.

You agree that the following terms will govern any purchases made which are charged to any charge account that I may have with Cooperative Energy Company.

- 1. In this agreement "you" and "your" is the applicant(s), and "we" or "our" is Cooperative Energy Company.
- 2. You will pay the entire balance showing on your account statement by the Payment Due Date and you understand that if any portion of the balance remains unpaid beyond that date, your credit privileges may be suspended or revoked.
- 3. You agree that a *interest or finance charge of 1.65%, which is and annual percentage rate of 19.8%, per year* will be applied to that part of any balance that resulted from purchases made during a calendar month, but not paid before the 15th of the following month plus any previous balance, that remained unpaid. *The minimum charge is \$1.00 per month*. Interest may be compounded at our discretion.
- 4. If the account is not paid in full by the end of the second month following the month of purchase, the account may be classified as delinquent and no further credit shall be extended until the account is paid in full. We may refuse to extend additional credit at any time.
- 5. Payments shall be applied first to the unpaid finance or interest charge, then to the remaining outstanding balance.
- 6. You shall be liable for the payment of all our collection costs, court costs, and attorney's fees to pursue payment of your debt in the event that payment is not received when due.
- 7. The terms and conditions of this document may be amended in writing by the agreement of all parties. Such amendments shall not affect your charges or other debt incurred prior to the amendment.
- 8. If applying for a Joint Account, both of us agree to be bound by the terms of this agreement and each of us agree to be jointly and severally liable for payment of all purchases or charges made under this agreement.
- 9. You shall have the right to limit or terminate your charge account, but termination shall not affect your obligation to pay any existing balance. We may, at our option, declare the entire balance due and payable at any time.
- 10. This agreement shall be construed as having been delivered in the State of Iowa and shall be construed in accordance with the laws of the State of Iowa. All parties hereto expressly agree that the venue shall be in the State of Iowa, County of Osceola only, and the undersigned hereby consents to the jurisdiction of the Courts of the State of Iowa, County of Osceola, and the U.S. District for the District of Northern Iowa.
- 11. We are not bound by any notation of "paid in full" or otherwise that accompanies any payment if the payment is not for the total amount owed at the time. Any agreement for a lesser amount than what is owed must be expressly agreed to by Cooperative Energy Company in a written agreement signed by the Cooperative Energy Company's General Manager.
- 12. We are not liable for any consequential or special damages of any kind and the implied warranty of merchantability and of fitness for a particular purpose are waived by you.

NOTICE: See below for important notice information regarding your right to dispute billing errors.

I certify that everything I have stated in this application is true and correct. I understand that Cooperative Energy Company will retain this application whether or not it is approved. You are authorized to check my credit and employment history and to answer questions about your credit experience with me, including obtaining a credit report on the individual applicant(s) and reporting applicant(s) performance under this Agreement to credit reporting agencies.

APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY

BUSINESS NAME:

| NAME: | TITLE: | | DATE: | | | | | | |
|---|--------|----------------|-------|-------------|--|--|--|--|--|
| NAME: | TITLE: | | DATE: | | | | | | |
| NAME: DATE: DATE: DATE: If you think your bill is wrong, or if you need more information about a transaction on your bill, write us on a separate sheet of paper at the address listed on the top of this Agreement. Write to us as soon as possible. We must hear from you no later than 60 days after we send you the first bill on which the error or problem appears. In your letter, give us the following information: Your name and account number, the dollar amount of the suspected error, describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you're not sure about. We will acknowledge your letter within 30 days, unless we have corrected the error by then. Billing errors do not include complaints about the quality of any goods or services. Within 90 days, we will either correct the error or explain why we believe the bill was correct. This Notice is not part of the Agreement but instead a Notice Advising you of your right to dispute billing errors. | | | | | | | | | |
| FOR OFFICE USE | | | | | | | | | |
| Credit Approved | Date | Credit Refused | Date | Ву | | | | | |



BUSINESS ACCOUNT CREDIT APPLICATION AND AGREEMENT

1708 Pierce Ave, Sibley, IA 51249

712-754-2586

b.ahlberg@coopenergyco.com

PERSONAL GUARANTEE (to be completed by all applicants)

Each of the undersigned hereby guarantees full payment of all present and future indebtedness of the applicant. This guarantee is open and continuous and is given to induce Cooperative Energy Company to extend credit to the applicant. This personal guarantee shall remain effective until revoked by the undersigned by notice in writing to Cooperative Energy Company. However, such a revocation shall be effective only as to amounts due which arise out of new contracts or transaction entered into more than 30 days after receipt of notice by Cooperative Energy Company. Such notice must be given by certified mail to Cooperative Energy Company. At any time Cooperative Energy Company may, without novice, 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 and otherwise deal with applicant and other guarantors in any manner deemed fit, without waiving the effectiveness; of this personal guaranty. Each guarantor waive presentment, demand, protest, and novice of any kind. If there is more than one guarantor, the obligations are joint and several. Cooperative Energy company 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, Cooperative Energy Company shall be entitled all of its costs and attorney fees from any personal guarantor. All notices regarding this personal guarantee must be sent to Cooperative Energy Company at 1708 Pierce Avenue, PO Box 254, or any other address requested by Cooperative Energy Company. Each guarantor hereby consents to the Courts of the State of Iowa, County of Osceola, and the U.S. District for the Northern District of Iowa.

| Guarantor Name and Title (print) | | Guarantor Name and Title (print) | | |
|----------------------------------|----------|----------------------------------|------|--|
| Guarantor SSN | | Guarantor SSN | | |
| Guarantor Signature | Date | Guarantor Signature | Date | |

The Federal Equal Opportunity Act prohibits creditors from discrimination against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has, in good faith, exercise any right under the Consumer Credit Protection Act. The federal agency that administers compliance with law concerning this credit is the Federal Trade Commission, Division of Credit Practices, 6th and Pennsylvania Avenue, NW, Washington, D.C. 20580