



**TOWN & COUNTRY CO-OP, INC.**

813 CLARK ST. • ASHLAND, OH 44805-1967  
800.551.5081 • 419.281.2153 • FAX 419.281.0398  
www.townandcountry.coop

Date \_\_\_\_\_

**BUSINESS CREDIT APPLICATION**

The following information is given for the purpose of obtaining credit from Town & Country Co-op, Inc.  
This information will be treated in a confidential manner.

Company Legal Name \_\_\_\_\_  Check if Incorporated

Trade Name (if different) \_\_\_\_\_

Billing Address \_\_\_\_\_ City, State & Zip \_\_\_\_\_

Shipping Address \_\_\_\_\_ City, State & Zip \_\_\_\_\_

Owner's Name \_\_\_\_\_ Address \_\_\_\_\_

S.S. # \_\_\_\_\_ Phone \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Type of Business \_\_\_\_\_ Monthly credit requested (Est.) \$ \_\_\_\_\_

Year Established \_\_\_\_\_ Accounts Payable Manager \_\_\_\_\_

Present Location since \_\_\_\_\_ Phone \_\_\_\_\_

**TRADE REFERENCES** (Minimum of three) \_\_\_\_\_ Dun & Bradstreet # \_\_\_\_\_

1. Firm \_\_\_\_\_ City, State & Zip \_\_\_\_\_ Phone \_\_\_\_\_

2. Firm \_\_\_\_\_ City, State & Zip \_\_\_\_\_ Phone \_\_\_\_\_

3. Firm \_\_\_\_\_ City, State & Zip \_\_\_\_\_ Phone \_\_\_\_\_

**BANK REFERENCE**

Name \_\_\_\_\_ Officer \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

**APPLICANT STATEMENT**

I agree to pay the full purchase price for all goods, materials, equipment and/or services purchased from Town & Country Co-op, Inc. ("Town & Country") within thirty (30) days of the billing date shown on each invoice or monthly account statement. If I do not make a full payment within thirty (30) days of the billing date on any invoice or monthly account statement, I agree that, in addition to any unpaid balance of principal, I will be subject to and hereby agree to pay a service charge of two percent (2.0 %) per month (annual percentage rate of 24 %), in addition to Town & Country's attorney's fees incurred in collecting all delinquent account balances. I further agree to be bound by all of the terms and conditions set forth on both sides of any and all Town & Country invoices or monthly account statements. My signature below indicates that I have read, understood, agree and covenant to be bound by the terms set forth in this Application and Town & Country's invoices and account statements and that all information I have provided herein is true and accurate.

I hereby authorize the credit references named herein, in addition to any credit service companies or bureaus, to release any and all requested financial and credit information known to them to Town & Country to be used for the purpose of evaluating this Application for Credit. I also represent that this account will be used primarily for business, commercial or agricultural use.

**Please check one:**  
 I request that \_\_\_ fuel card(s) be issued for business use.  
 I do not want any fuel card(s) issued to the company.

Company Name \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**PERSONAL GUARANTEE**

For value received, the undersigned, being an officer, shareholder, member or partner of the commercial applicant referenced above, does absolutely, irrevocably, unconditionally, and personally guarantee the prompt and punctual full payment, when due, by acceleration or otherwise, of each and every debt obligation now existing or hereafter incurred, created, or acquired of by said commercial applicant to Town & Country, together with all finance charges, penalties, and other costs and expenses accruing thereon (including but not limited to Town & Country's reasonable attorney fees).

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_  
Guarantor Guarantor

**FOR CREDIT DEPARTMENT USE ONLY**

D & B Rating \_\_\_\_\_ Credit Limit \_\_\_\_\_

Credit Decision by \_\_\_\_\_ Date \_\_\_\_\_