



BRANCH _____

Sunrise Cooperative, Inc. Credit Dept.
PO Box 870, 2025 W. State St.
Fremont, OH 43420
419-332-6468 OR 1-800-321-5468 FAX 419-355-8743
FARM CREDIT APPLICATION

THIS INFORMATION WILL BE TREATED IN A CONFIDENTIAL MANNER

PLEASE PRINT AND COMPLETELY FILL IN ALL BLANKS

Account Name: _____ Individual
 Address: _____ Partnership
 City, State, Zip: _____ Corporation
 Home Phone: _____ County: _____ LLP
 Cell Phone: _____ Fax #: _____ LLC
 (Must Provide) Birthdate: _____ LTD
 SS # or Fed. ID # _____ Trust
 E-Mail Address: _____

If a partnership, corporation, LLP, LLC, LTD or Trust give name & address of owner(s)

NAME	TITLE	ADDRESS	CITY, STATE, ZIP	SS # and Birthdate (MUST PROVIDE)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Employer _____ Position _____ Income _____
 Spouse's Employer _____ Position _____ Income _____

REFERENCES:

Previous Supplier Name: _____ Supplier Address: _____
 Bank or Lenders Name: _____ Phone: _____
 Contact Person: _____
 Address: _____ City: _____ State: _____ Zip: _____

FARM INFORMATION:

Livestock type: _____ Acres Owned: _____ Acres Rented: _____
 & Numbers (Dairy, Beef, Hogs, Sheep, Poultry, etc.)

We are making this application and statement for the purpose of securing credit on account, and we represent that the information given herein is true and accurate. We authorize the references named herein, both financial institutions and suppliers, to release any financial and credit information known to them, for the purpose of evaluating this application for credit. We agree to pay according to the terms of each account and request the billings be made in the account name specified. If a Service Fee is added, it is computed on the previous balance, less payments and credits appearing on the face of the statement, at a periodic rate of up to 2% per month which is an annual percentage rate of up to 24%. The minimum monthly finance charge will be one dollar. By the signature(s) below, I/we agree to be bound by the Dealer's credit terms and acknowledge receipt of a copy of the credit terms.

Signed: _____ Title: _____ Date: _____

If Applicant list above is a Corporation, Partnership, LLP, LLC, LTD, or Trust, all owners must sign below.

I personally guarantee payment of all company charges, as consideration for Sunrise Cooperative Inc. to extend credit to the above named applicant.

Signed: _____ Signed: _____
 (Guarantor) (Guarantor)

Name _____ Address _____

SPECIAL BLANKET CERTIFICATE OF EXEMPTION FOR DEALERS AND DISTRIBUTORS

The undersigned hereby claims exemption on purchase of tangible personal property and services from SUNRISE COOPERATIVE, INC. on or after _____
NAME OF VENDOR DATE

and certifies that this claim is based upon the purchaser's proposed use of the items purchased, the activity of the purchaser, or both, as shown hereon:

- () 1. Sold for resale.
- () 2. Used directly in farming, agriculture, horticulture, or floriculture.
- () 3. Used primarily in a manufacturing operation to produce tangible personal property for sale.
- () 4. Used directly in production of crude oil or natural gas.
- () 5. Used directly in rendition of a public utility service.
- () 6. Used in the process of the reclamation of strip mined land.
- () 7. Sold to the state, or any of its political subdivisions.
- () OTHER – Specify from exemptions listed on back of card: _____

This certificate shall continue in force until revoked and shall be considered a part of each order given to the above named vendor unless the order specifies otherwise. *In the event this claim is disallowed the purchaser will reimburse the seller for the amount of any tax, interest and/or penalties assessed.*

PURCHASER

PRINT NAME _____

Address _____

Vendor's License No., if any _____ City _____ Zip _____

Date Signed _____ Signature _____

The appropriate reason, from the following list, shall be inserted in the blanket exemption certificate when claiming exemption or exception from the Ohio Sales or Use Tax.

- 8. Sold to church or charitable not-for-profit organization.
- 9. Sales and installation of portable grain bins to a person engaged in farming, agriculture, horticulture, or floriculture.
- 10. Sales and installation of agricultural land tile to a person engaged in farming, agriculture, horticulture, or floriculture.
- 11. Sold to out-of-state retailer for use outside this state.
- 12. Used primarily for transporting tangible personal property by a person engaged in highway transportation for hire.
- 13. Sale of water to a consumer for residential use.
- 14. Used exclusively for a facility granted an Air or Noise Pollution Certificate.
- 15. Used exclusively for a facility granted a Water Pollution Certificate.
- 16. Used exclusively for a facility granted an Energy Conservation or Solid Waste Certificate.
- 17. Direct payment authority pursuant to Sec. 5739.03 (enter direct pay permit number on front of card).

This certificate cannot be used by construction contractors to purchase material for incorporation into real property under an exempt construction contract. Construction contractors must comply with rule 5703-9-14 of the Administrative Code.

Important Note: Every completed sales tax exemption certificate should be retained permanently. *Never* throw away older cards even if a new card is signed by the same person or company.
Never!