



Swan Valley Consumers Cooperative Ltd.



Credit Application & Agreement

811 Main Street Swan River, MB R0L 1Z0
P: 204-734-3431 F: 204-734-5093

Member # _____ Credit Limit Requested: _____

Personal Information

Legal / Surname _____ First Name _____ Middle Initials _____
Mailing Address _____
Town / City _____ Postal Code _____
Home Phone # _____ Business # _____ Cell # _____
Applicants Date of Birth _____ / _____ / _____ Social Insurance Number _____
Day Month Year

Employment Information

Occupation _____ Present employer _____
Present Employer Address _____ Employed Since _____
Present Employer Phone # _____ Gross Monthly Income _____ Full Time Part Time
Previous Employer (if less than 2 years) _____
Address _____ Gross Monthly Income _____

Co-Applicant Information

Legal Surname _____ Given Names _____
Occupation _____ Employer _____ Full Time Part Time
Address _____ Employed since _____ Gross Monthly Income _____
Co-Applicants Date of Birth _____ / _____ / _____ Social Insurance Number _____
Day Month Year

Financial Information

Chequing Yes No Name & Address of Bank or Credit Union _____

Savings Yes No Name & Address of Bank or Credit Union _____

Vehicle Own Lease Monthly Payment _____

Home: Own Rent Monthly Payment _____

Mortgage: Yes No Monthly Payment _____

Financial Institution carrying mortgage _____ Phone _____

Address _____

Additional Loans (E.g. Line of Credit)

Name of Bank or Credit Union	Contact Information	Amount Owing	Monthly Payment

Credit References

Name _____	Contact information _____
_____	_____
_____	_____

Have you or your business ever been in receivership or declared bankruptcy?

Yes No

Have you or your business been party to any claims or lawsuits?

Yes No

Terms and Conditions of Agreement

I/We understand that purchases made during a calendar month on the Co-op account are due and payable in full by the end of the next month.

I/We hereby agree to an interest charge of 1 ¼ per annum on any balance outstanding on the end of the month following billing. Interest subject to change without notice.

I/We hereby authorize my bankers and trade creditors to disclose details of my liabilities if requested.

I/We also consent to the conduct of a personal investigation by the company and /or Reporting Agency.

I/We hereby apply to Swan Valley Consumers Cooperative Ltd. For credit privileges to purchase goods and services on terms and conditions to be determined by Swan Valley Consumers Cooperative Ltd. from time to time.

I/We shall pay the full amount of all invoices complete with the interest despite that no signatures were obtained on invoice(s) at time of delivery.

The Swan Valley Consumers Cooperative Ltd. Reserves the right to refuse credit privileges to any person(s) at any time.

 The words I and We mean the person(s) entering into an agreement with Swan Valley Consumers Cooperative Ltd.

Signature of Applicant _____

Signature of Co-Applicant _____

Date _____

Signature of Employee Representative of the
Swan Valley Consumers Cooperative Ltd