

FOOTHILLS LIVESTOCK CO-OP

FEEDERS DIVISION APPLICATION

Box 725, Rocky Mountain House, AB T4T 1A5
 Phone: 403-845-6669 Fax: 403-845-4115 Toll Free: 1-866-848-6669
 Email: frontdesk@foothillslivestock.ca

YOU MUST INCLUDE A PHOTO COPY OF I.D. WITH SIGNATURE

Applicant #1 Information

Legal Surname	Given Name	Middle Initial	Birth Date	M/DD/YR	Social Insurance Number
Address		Town/City	Province		Postal Code
Home Telephone Number	Business Telephone Number		Cellular Number	Fax Number	
Email Address:					
Contact Person (Other than Spouse)		Town/City	Province		Phone Number
Directions from nearest town (Include Name of Town)					
Name of Employer (if other than self)		Years Employed Here	Position Held		
Address of Employer		Town/City	Province	Postal Code	Telephone Number
Spouse's Legal Surname	Given Name	Middle Initial	Birthdate	Social Insurance Number	

Applicant #2 Information (Joint Applicants Only)

Legal Surname	Given Name	Middle Initial	Birth Date	M/DD/YR	Social Insurance Number
Address		Town/City	Province		Postal Code
Home Telephone Number	Business Telephone Number		Cellular Number	Fax Number	
Email Address:					
Contact Person (Other than Spouse)		Town/City	Province		Phone Number
Directions from nearest town (Include Name of Town)					
Name of Employer (if other than self)		Years Employed Here	Position Held		
Address of Employer		Town/City	Province	Postal Code	Telephone Number
Spouse's Legal Surname	Given Name	Initial	Birth Date	Social Insurance Number	

Please note: If Application is to be in one name only, complete Applicant #1 Information. If Application is to be in joint names, both Applicant #1 and Applicant #2 need to be completed.

In the case of Joint Application, we may need each Applicant to complete a Farming Operations Statement. If this is the case, contact our office and we will forward another Farming Operations Statement to you since the Application is sent with only one.

Loan Purpose

I/We hereby apply to Foothills Breeders Co-op for a loan to purchase cattle as follows:	Credit Amount Requested:
Interest Rate: VARIABLE	\$

Description of Proposed Plan of Action:

AUTHORIZATION

I am making this application for Loan(s) to Foothills Livestock Co-Op. If my Application is accepted I will be required to complete a Loan Agreement, Security Agreement, Promissory Note and to provide other documents and information to obtain the Loan(s).

FLC may disclose the particulars of my Loan(s) to others for the purpose connected with my Loan(s). I authorize and consent to the receipt and exchange of credit information about me from time to time, including the exchange and sharing of credit information with any credit reporting agency, credit bureau or person with whom I may have financial relations. I further authorize my creditors or any other person to provide FLC with any information about my financial affairs which they may require.

I certify that all information I have provided in this application is accurate and is a true representation of my financial position.

Signature of Applicant #1

Date

Signature of Applicant #2

Date

For Office Use Only

Approved Limit	\$ _____	Date: _____
Credit Limit Increased To:	\$ _____	Date: _____
Credit Limit Increased To:	\$ _____	Date: _____
Credit Limit Increased To:	\$ _____	Date: _____
Credit Limit Increased To:	\$ _____	Date: _____
Credit Limit Increased To:	\$ _____	Date: _____
Credit Limit Increased To:	\$ _____	Date: _____
Credit Limit Increased To:	\$ _____	Date: _____

Approved

Declined

Pending

Supervisor: _____

Date: _____

Director: _____

Date: _____