



**LEGACY COOPERATIVE**

P. O. BOX 8

BISBEE, NORTH DAKOTA 58317-0008

(701) 656-3263 • 1-800-450-3263 • FAX (701) 656-3371

<b>For Administrative Use Only</b>	
Date:	/ /
Approved / Declined:	<b>(circle one)</b>
<b>By:</b>	
Account Number:	#
Credit Limit:	\$
Lien Required? Yes / No	<b>(circle one)</b>

**2023 Application for Delayed Payment  
(Crop Protection & Seed Program)**

**\*IMPORTANT\***

**Please Read Carefully:**

- 1) Program offer ends **March 31, 2023**. NO Applications will be accepted after March 31, 2023.
- 2) If this application is approved, you will receive an Approval Letter.
- 3) Certified Spring Wheat Seed, Fertilizer, Dry Edible Bean Seed and Cover Crop Seed is NOT a qualifying purchase under this Program.

\$ \_\_\_\_\_ Please Indicate Amount of Credit Request.

**INDIVIDUAL INFORMATION – Please Print**

Legal Name _____	DBA-Doing Business As _____
Mailing Address _____	
CITY STATE ZIP	
Phone (____) _____	Cell Phone (____) _____ E-Mail _____

**GUARANTORS (i.e. OWNERS, OFFICERS, MEMBERS OR PARTNERS) – Please List**

Name	Title	Social Security Number	Date of Birth

**Special Terms & Conditions:**

1. To qualify for this program, ALL existing Accounts need to be current and in good standing as of the date of this Application and on the date(s) of program purchase(s) concerning other non-qualifying purchases on Account.
2. Legacy Cooperative reserves the right in its sole discretion to require completion and submission of an Application for Open Account Credit along with this Application on ALL existing Accounts.
3. Payment is Due-In-Full on **October 31<sup>st</sup>, 2023**.
4. If payment-in-full is not made by October 31<sup>st</sup>, 2023, interest will be charged at 18.00% APR on the unpaid balance retroactive to **July 1<sup>st</sup>, 2023**.
5. Legacy Cooperative reserves the right in its sole discretion to require repayment of program account balances and enforce lienholder rights prior to the payment-in-full maturity date of **October 31<sup>st</sup>, 2023**.

**\*PLEASE CONTINUE TO THE NEXT PAGE\***

**Other Terms & Conditions:**

1. **FINANCIAL INFORMATION AND CREDIT REPORTS.** The undersigned authorize Legacy Cooperative to request consumer credit reports about you (Applicant or Owner/Principal/Guarantor of Applicant) for evaluating this Application and in the future for reviewing Account credit limits, for Account renewal, for servicing and collection purposes and for other legitimate purposes associated with your Account. Upon request, we will inform you if a consumer report was requested and, if it was, provide you with the name and address of the consumer reporting agency that furnished the report. The undersigned authorize their lenders and creditors to provide credit information to Legacy Cooperative, including copies of financial statements and supporting schedules.
  
2. **PERSONAL GUARANTY.** Each person who signs this Application personally guarantees payment of all purchases charged to any Account which is opened pursuant to this Application, and all interest charges and costs of collection. Each person who signs this Application agrees that he or she shall be jointly and severally liable with the Applicant for payment of all obligations of the Applicant incurred pursuant to this Application.
  
3. **SECURITY INTEREST.**
  - A) Pursuant to Section 6.10 of the ‘Restated Articles of Association And Bylaws’ of Legacy Cooperative- “The Cooperative shall have a first lien on any patronage equity credit for all indebtedness of the holder thereof to this Cooperative.”
  - B) Legacy Cooperative reserves the right in its sole discretion to obtain Agricultural Supplier’s Lien(s) on you as security for the repayment of all qualifying purchases on this Account to the extent permitted by Chapter 35-31 of the North Dakota Century Code. Lien(s) may be obtained at the time of this Application and/or from time to time while this program remains in effect and until all purchases have been paid-in-full.

I certify that I am authorized on behalf of the Applicant to bind the Applicant to the Terms and Conditions set forth above.		
I agree that I personally am jointly and severally liable with the Applicant for payment of all balances on any Account opened pursuant to this Application.		
I have read and agree to the Terms and Conditions set forth above.		
Guarantor’s Signature	Date	Print Name
Guarantor’s Signature	Date	Print Name
Guarantor’s Signature	Date	Print Name
Guarantor’s Signature	Date	Print Name

\*If you are applying for credit with Legacy Cooperative for the first time this Application must also accompany a completed “Application for Open Account Credit.” A request for that Application can be made with any Legacy Cooperative Representative.\*