



**Biofert Manufacturing Inc.**  
 464 Riverside Road  
 Abbotsford, BC V2S 7M1  
 Tel: 604-557-1496  
 Fax: 604-864-8418  
 www.biofert.ca

Account #:
Sales Rep Code:
Credit Limit:

## Account Application

Applicant's Name		Full legal name or business name:										
Mailing Address		Street:			City:			Province:		Postal Code:		
Delivery Address		Street:			City:			Province:		Phone:		
Phones	Area Code:	Phone:			Fax:			Cellphone:				
Internet	Email Address:			Website:			<input type="checkbox"/> Check here if you consent to receive emails from us. You may withdraw consent at any time.					
Type of Business ( <i>check one</i> ): Must sign Personal Guarantee on reverse.		Individual/Proprietorship <input type="checkbox"/>			Partnership <input type="checkbox"/>			Limited Company (Inc. No. _____) <input type="checkbox"/>				
<b>Principles</b>		Full Legal Name:						DL #:				
		Home Address:						Phone:				
		Full Legal Name:						DL #:				
		Home Address:						Phone:				
		Full Legal Name:						DL #:				
		Home Address:						Phone:				
<b>Contact Person</b>		Name:						Phone:				
<b>Operation Type</b>				Total Acres Owned:		Total Acres Leased:		Years in Business:		PST # or Farm ID #:		
Small Fruit/ Field Veg <input type="checkbox"/>	Field Floral & Bulb <input type="checkbox"/>	Forage/ Ranch <input type="checkbox"/>	Garden Center <input type="checkbox"/>	Greenhouse Floral/Veg <input type="checkbox"/>	Hydro- seeding <input type="checkbox"/>	Landscape/ Lawn Care <input type="checkbox"/>	Nursery <input type="checkbox"/>	Organic Farm <input type="checkbox"/>	Professional Turf <input type="checkbox"/>	Reclama- tion <input type="checkbox"/>	Tree Fruit/ Grape <input type="checkbox"/>	Other:
<b>Proof of Commercial Operation*</b> (Must provide at least one copy of the following:)		Folio, Tax Assessment # or Farmer ID Card (with Expiry Date) <input type="checkbox"/>			Pesticide Applicator's License (with Expiry Date) <input type="checkbox"/>			Business License (with Expiry Date) <input type="checkbox"/>				
<b>Credit Limit Requested:</b> \$				Do you have any legal proceedings or judgements against you? Yes <input type="checkbox"/> No <input type="checkbox"/>								
<b>Credit References</b>		Company Name:						Phone:				
		Company Name:						Phone:				
		Company Name:						Phone:				
<b>Banking Information</b>		Name of Institution:			Location or Branch:			Account No.:				

\*Proof of commercial operation required for all commercial chemical purchases.

### Terms and Conditions:

I/We declare that the information in this application is true and correct in every respect. This declaration is made for the purpose of obtaining credit from Biofert Manufacturing Inc. The undersigned hereby expressly consents to Biofert Manufacturing Inc. or an agent thereof obtaining such reports containing credit or personal information regarding the undersigned, from the undersigned's present or future employer, bank, credit union (as stated above) or any other credit references as Biofert Manufacturing Inc. or its agent may from time to time see fit to obtain in connection with the within application. Also, I/we agree to the conditions of sale as stated on invoices or Bills of Lading, and we accept for product pickup or delivery, if there is no customer's signature, the shipper's or driver's signature will be proof of delivery. The applicant(s) hereby agree(s) to comply with the credit terms as outlined on the reverse.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Signature of Witness:	Signature of Applicant:
Name and Title:	Name of Applicant (please print):
	Signature of Applicant:
	Name of Applicant (please print):

## Applicant's Authorization and Declaration:

1. I am making this application and agreement for the purposes of securing credit from Biofert Manufacturing Inc. (herein called BioFert). I shall pay for all purchases charged against this account and all lawful credit charges made respecting these purchases.
2. All accounts are due and payable upon receipt of statement. In default of payment after 30 days from invoice date, the service charge to be paid is 1 ½ % calculated monthly on the unpaid balance of principal plus interest, (approximately 19.57 % per annum). Each payment shall be first applied against service charges owing and then to the balance. Costs of collection, including legal fees and disbursements on a solicitor and client basis will be paid by the undersigned.
3. This agreement shall be subject to any applicable legislation and any inconsistent provision of the agreement shall be read as fully conforming to the requirements of the legislation.
4. Joint account require the signature of both partners for both to obtain credit and both jointly and severally are responsible for the purchases on the accounts. When applicable, words in the singular are to include the plural.
5. Biofert may vary the terms and conditions of this agreement from time to time after giving notice of the variation to me.
6. This application and agreement shall be binding upon me, my executors, administrators, successors and assigns and shall ensure to the benefit of your successors and assigns.

## Personal Guarantee

In consideration of your supplying goods and materials to:

Company Name:

(herein called the debtor) from time to time, on such terms of credit as shall be agreed between you, the undersigned jointly and severally hereby guarantees to you the due payment, of all monies which are now or which shall at any time hereafter be due to you from the debtor, for those goods and materials and also due payment of all promissory notes, commercial paper and all securities which may at any time hereafter be due to you from the debtor or held by you with respect to any such goods and materials upon which the debtor is, shall, or may become liable.

You shall have the right at any time and from time to time to refuse to supply further goods and materials or to refuse credit to the debtor or to refuse both goods and materials and credit, at your discretion to take, release and discharge any and all securities, notes and other obligations, to extend time for payment to the debtors or to any person liable upon in any security, note or other obligation which you may at any time hold and to compromise with him or them without notice to

me without discharging or effecting my liability under this guarantee.

You shall not be bound to exhaust your resources against the debtor or other persons or the securities you may hold, before being entitled to payment from me of the amount hereby guaranteed.

This guarantee shall be continuing guarantee and shall cover all liabilities which the said debtor may incur before the expiration of 30 days from the date of written notice to make no further advances upon in the security of this guarantee.

I agree that this guarantee shall be valid and binding notwithstanding any change or changes in the name of the debtor or any change in the ownership of the debtor, or if the debtor be a partnership by any change in the composition of the partnership.

This guarantee and agreement shall be binding upon me, my executors, administrators, and assigns and shall ensure to the benefit of your successors and assigns.

Dated at: \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Signature of Witness:	Signature of Guarantor:
Name of Witness (please print):	Name of Guarantor (please print):
Signature of Guarantor:	Signature of Guarantor:
Name of Guarantor (please print):	Name of Guarantor (please print):
Signature of Guarantor:	Signature of Guarantor:
Name of Guarantor (please print):	Name of Guarantor (please print):

## Farm Profile

Crop:	Acres:	Year Planted:
Crop:	Acres:	Year Planted:
Crop:	Acres:	Year Planted:
Crop:	Acres:	Year Planted:
Name of Processor Crops are sent to:		