

# Northern Star Cooperative Services

P.O. Box 458, Deer River, MN 56636

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fax: 218-246-8248

## Credit Application and Agreement

Last Name or DBA	First	Middle Init.	Tax I.D., EIN, or SSN	Telephone Number Home/Bus: Cell:		Date of Birth
Address					City	State
					ZIP Code	Yrs @ present address:
					<input type="radio"/> Own <input type="radio"/> Rent	
Present Employer	Address		Years	Employer Telephone	Position	Monthly Income
Co-Applicant Last Name	First	Middle Init.	Tax I.D., EIN, or SSN	Telephone Number Home/Bus: Cell:		Date of Birth
Co-Applicant Employer Name	Address		Years	Employer Telephone	Position	Monthly Income

### Credit References (For Business Applicants Only)

Name	Address	Telephone	Balance Due

Has applicant or co-applicant filed for bankruptcy protection within the past 7 years? Yes

If yes, provide date and location of filing: No

### Check Department(s) For Which You Are Applying For Credit

Propane  
  Fuel Oil  
  C-Store  
  All

### If Applying for Propane or Fuel Oil Service List Service Address below:

Address: \_\_\_\_\_

Are You:  
 Renting  
 Own  
 New Construction  
 Purchasing Property from: \_\_\_\_\_

The above information is for the purpose of obtaining credit and is warranted to be true. I agree to pay all bills in accordance with the Northern Star Cooperative Services Credit Policy upon receipt of my Statement or as otherwise expressly agreed. By signing this document I authorize the person of firms to whom this application is made to investigate the reference herein listed from any other person. I further acknowledge that I have read, understand, and agree to the terms and conditions of credit listed in the Northern Star Cooperative Services Credit Policy.

Signature of Applicant	Date
Signature of Co-Applicant	Date

### OFFICE USE ONLY

DATE: \_\_\_\_\_ REMARKS: \_\_\_\_\_

DR      LF      PR      HC      NH      LP      BK      WK      RM