



**DISCLOSURE STATEMENT**

Statements of Account	You will receive statements of Account every 27 to 34 business days. You will not receive a statement if there has been no activity in the applicable statement period and there is no balance in such statement period. You may receive biweekly statements of Account upon request.
Interest-free Grace period	Interest will not be charged if payment of the entire balance on the monthly statement is received by the Payment Due Date indicated on the statement, which is a minimum of 25 days after the date of the statement.
Annual Interest Rate	Interest is charged at the rate of 1.5% per month, compounded monthly (equivalent to 19.56% per annum)
Past Due Interest	If the entire balance is not paid in full by the Payment Due Date, then interest will be charged on the unpaid portion of the previous balance, from the statement date to the date payment is received on account.
Minimum Payment	Subject to any promotional offers, payment of the entire balance on the monthly statement by the Payment Due Date shown on the monthly statement is required.
Foreign Currency Conversion	Foreign currency transactions are converted and posted to the Account in Canadian currency on the date of transaction at the rate of exchange as provided by Thomson Reuters for such commercial transactions.
Annual Fees	No annual fee is charged.
Other Fees	Dishonoured Cheques – a handling fee of \$50.00 will be assessed per item.
Payments	For balance forward Accounts, payments are applied in the following order: first to all outstanding interest, second to any fees, and third to any unpaid principal amounts in order of payment due date. For open item Accounts, you are responsible for properly directing payments to be applied to specific purchases on your Account. If you fail to properly apply your payments to specific purchases, those purchases for which no payment has been applied will accrue interest as set out above.
Inquiries	For any questions concerning this application or Accounts, please call 1-877-258-4500.

**Upon completion of this form, and prior to submitting to the UFA credit Department, anyone signing Part A or Part B must have their identification verified and the Identification Verification form signed by a UFA employee.**

If you have any question or concerns about the application, please contact one of our Customer Service Representatives at 1-877-258-4500.

I certify that I have read, understand, and agree to the above disclosure statement.

If you are an Individual:

Signature \_\_\_\_\_ Name (Please Print) \_\_\_\_\_ Date: (YYYY-MM-DD) \_\_\_\_\_

If you are a corporation, partnership, sole proprietor or other entity:

Name: \_\_\_\_\_

Per: \_\_\_\_\_  
Signature Name (Please Print) Date: (YYYY-MM-DD)

Per: \_\_\_\_\_  
Signature Name (Please Print) Date: (YYYY-MM-DD)

**APPLICATION INFORMATION**

This Credit Application for an Account consists of six parts:

- Part A Applicant Information
- Part B Co-Applicant Information
- Part C Owner/Shareholder Information
- Part D Cardlock Application
- Part E Additional Terms and Conditions
- Part F Consent to Electronic Delivery of Documents

Unless otherwise herein provided, the following terms shall have the following meanings in this Credit Application:

- **Account** means the UFA Credit on Account subject of this application.
- **Account Agreement** means the UFA Credit on Account Agreement, a copy of which is available on UFA's website at <https://www.ufa.com/cooperative/Documents/Credit%20Options/UFA-TC.pdf>.
- **"We", "us", "our"** and **"UFA"** refer to the United Farmers of Alberta Co-operative Ltd., and its successors and assigns.



\*Required field

**NEW UFA ACCOUNT**

Requested credit limit (\$):*	Would you like to apply for a UFA cardlock card?	<input type="checkbox"/> Yes <input type="checkbox"/> No
-------------------------------	--	--

**OTHER EXISTING UFA ACCOUNTS**

Please list all other UFA Accounts held in the name of the Applicant and, if applicable, each Co-Applicant.

Complete the following four sections if Applicant is an individual.

**APPLICANT INFORMATION**

First name:*	Middle name:	Last name:*
Address:*		
City / town:*	Prov / state:*	Postal code / Zip:*
Years at this Address: * _____ (Own / Rent / Living with Parents / Other)		
Phone #:*	Phone #2:	Fax #:
Email Address:	Date of Birth:*	Social Insurance # (SIN):
Mother's maiden name (For security):*	Marital status:*	
Are You A: * <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Other (Please Specify) _____		

**APPLICANT EMPLOYMENT DETAILS**

Present Employer: If different than your Applicant company	Work Phone #:	Income per Annum (\$):
Occupation / Position: Required if applicable	Length of time with Present Employer: _____ Years _____ Months	
Employment status: <input type="checkbox"/> Permanent <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary	Full-time or Part-time: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	
Previous Employer: Required if less than 2 years with present employer	<input type="checkbox"/> This is your first job <input type="checkbox"/> You are a student	
Other sources of income: Second job, home business, etc	Income per Annum (\$):	

**APPLICANT DISCLOSURES**

Have you ever filed for personal bankruptcy or had a judgment against you?*	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will this account be used to conduct transactions on behalf of any other party than those named in the account information section?*	<input type="checkbox"/> Yes <input type="checkbox"/> No

**APPLICANT CREDIT DETAILS**

Name of Primary Bank:*	Branch name / Transit number:*		
Address:	City / town:	Prov / state:	Postal code:
Account Manager:	Phone #:	Fax #:	
Chequing Account #:	Savings Account #:		
Operating Line limit(s) or Line of Credit limit(s) (\$):*	<input type="checkbox"/> Not Applicable	Amount(s) outstanding (\$): Required if applicable	
Term loans – Amount(s) outstanding (\$):*	<input type="checkbox"/> Not Applicable	Monthly payment(s)(\$): Required if applicable	
Mortgage Financing lender:*	<input type="checkbox"/> Own Rent	Value of Property (\$): Required if applicable	Amount outstanding (\$): Required if applicable
Credit cards – Total outstanding (\$): Required if applicable			
Primary UFA location: Required if applicable	Existing Fuel Provider:		City / town:



Complete the following four sections if Applicant is a corporation, partnership, sole proprietorship or other entity.

### BUSINESS INFORMATION

Full Business legal name:*		Trading symbol:	
Operating as: If applicable		Parent company name: If applicable	
Briefly describe your Business Operation:*		Annual sales (\$):*	
Year operations commenced: *	Date of incorporation: yyyy-mm-dd	Number of Employees:	Industry code:
Business address:*			
City / town:*	Prov / state:*	Postal code / Zip:*	
Billing Address: If different than business			
City / town:	Prov / state:	Postal code / Zip:	
Primary contact:*	Position / title:*	Email Address:	
Work Phone #:	cell #:	Fax #:	
Secondary contact:	Position / title:	Work Phone #:	
Authorized Purchasers:			
Is your organization a charity registered with the Canada Revenue Agency?*			<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your organization solicit charitable contributions from the public?*			<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes to the above, are contributions in excess of \$50,000 per month?*			<input type="checkbox"/> Yes <input type="checkbox"/> No

### OWNERSHIP INFORMATION

Ownership type: * <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Not for Profit		Number of owners:*
Name of owner / Shareholder / Partner:		% owned:
Name of owner / Shareholder / Partner:		% owned:
Name of owner / Shareholder / Partner:		% owned:
Name of owner / Shareholder / Partner:		% owned:
Name of owner / Shareholder / Partner:		% owned:
Each Owner/shareholder must complete and sign a separate Part B.		Total:

### CREDIT INFORMATION

Name of Primary Bank:*		Branch name / transit number:*	
Address:	City / town:	Prov / state:	Postal code:
Account manager:	Phone #:	Fax #:	
Chequing Account #:		Savings Account #:	
Operating Line limit(s) or Line of Credit limit(s) (\$):*		<input type="checkbox"/> Not Applicable	Amount(s) outstanding (\$): Required if applicable
Term loans – Amount(s) outstanding (\$):*		<input type="checkbox"/> Not Applicable	Monthly payment(s)(\$): Required if applicable
Mortgage Financing lender:*	<input type="checkbox"/> Own Rent	Value of Property (\$): Required if applicable	Amount outstanding (\$): Required if applicable
Credit cards – Total outstanding (\$): Required if applicable			
Primary UFA location: Required if applicable		Existing Fuel Provider:	
City / town:		City / town:	
Trade / credit reference name:	City / town:	Phone #:	
Trade / credit reference name:	City / town:	Phone #:	
Trade / credit reference name:	City / town:	Phone #:	

**DISCLOSURES**

Has the business ever filed for bankruptcy or been placed in receivership?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details: If yes
Has the business ever been involved in any lawsuits or claims?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details: If yes
Is the business in arrears in payroll deductions or taxes (income, GST, PST, property, business)?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details: If yes
Has the business violated any environmental regulations?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details: If yes
Is the business liable for any third party guarantees?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details: If yes
Will this account be used to conduct transactions on behalf of a party other than those named in the application?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details: If yes

Complete this section if Applicant is applying for credit for a farm operation, whether or not Applicant is an individual, corporation, partnership, sole proprietorship or other entity.

**FARM INFORMATION**

How long have you farmed (Yrs)?*	How long at this location (Yrs)?*	Legal Description of Home Quarter:	
Land owned (# of Acres):		Land rented (# of Acres):	<input type="checkbox"/> Not Applicable
Value of Land and Buildings owned:		Financing outstanding:	Lender:
Market Value of Equipment owned:		Financing outstanding:	Lender:
Grain Inventory (in Bushels):		Value:	
Livestock inventory:		Value:	
Total Farm income:			

All Applicants must complete this section.

**AUTHORIZED PURCHASERS**

List the full legal names of all persons who the Applicant authorizes to make purchases on its UFA Credit on Account. Attach a separate sheet if necessary.

Where there is a Co-Applicant, please provide the address(es) and e-mail address(es) that Applicant and Co-Applicant jointly designate to receive monthly statements and other cost of borrowing disclosure documents.

**CONTACT INFORMATION FOR DISCLOSURE**

c/o:		
Address:	City / town:	Province / Postal code:
E-mail address:		
c/o:		
Address:	City / town:	Province / Postal code:
E-mail address:		



**APPLICANT SIGNATURE (PART A)**

The Applicant named above (the "Applicant") hereby applies to UFA for an Account for the purchase of goods and/or services from UFA on the terms and conditions as set forth in Part E of this Credit Application and in accordance with the Account Agreement.

Applicant acknowledges and agrees that credit will only be granted to the Applicant upon our acceptance of this Credit Application, and only in the amount approved by us. Applicant acknowledges that we may, as a condition of acceptance of this Credit Application, require Applicant to enter into a general security agreement and/or, in the case of an Applicant that is a corporation, partnership or other entity, require the Applicant to provide personal guarantees in a form acceptable to us. We may also require such a general security agreement or personal guarantees to be provided after we accept the Credit Application, in the event that the creditworthiness of the Applicant declines as determined in our sole discretion.

Upon our acceptance of this Credit Application, Applicant agrees to be bound by the Account Agreement, and agrees to be jointly and severally liable with any Co-Applicants for their obligations under the Account Agreement. Each of Applicant, and any Co-Applicants, may hereafter give us instructions regarding the Account Agreement. We are not responsible for ensuring that there has been consensus among Applicant and any Co-Applicants with respect to such instructions.

By signing this Credit Application, Applicant authorizes us to collect, use and disclose personal information about Applicant in order to, amongst other purposes, verify Applicant's creditworthiness and process this Credit Application and, if this Credit Application is accepted, administer the Account, all in accordance with the UFA Privacy Policy.

This Credit Application may be executed in multiple counterparts, each of which shall be deemed to be an original document and all of which shall constitute one agreement. All counterparts shall be construed together and shall constitute one and the Credit Application. This Credit Application, to the extent signed and delivered by means of electronic transmission (including, without limitation, PDF, facsimile and Internet transmissions), shall be treated in all manner and respects as an original document and should be considered to have the same binding legal effect as if it were the original signed version thereof delivered in person.

By signing, Applicant certifies that he/she/it has read, understand, and agree to the terms and conditions of this Credit Application and the Account Agreement.

If Applicant is an Individual:

Signature \_\_\_\_\_ Name (Please Print) \_\_\_\_\_ Date: (YYYY-MM-DD) \_\_\_\_\_

If Applicant is a corporation, partnership, sole proprietor or other entity:

Name: \_\_\_\_\_

Per: \_\_\_\_\_  
Signature Name (Please Print) Date: (YYYY-MM-DD)

Per: \_\_\_\_\_  
Signature Name (Please Print) Date: (YYYY-MM-DD)

**IDENTIFICATION VERIFICATION**

Each individual that signed "Applicant Signature (Part A)" above must provide identification for this section. This section must be completed, verified and signed by a UFA representative at a UFA location.

Please record the particulars of one (1) piece of identification in original form.: The Identification must be government-issued photo identification (e.g. driver's license, passport, firearms license)

<b>Name of Signatory:</b>		<b>Type of Identification:</b>	
<b>Reference or Account #:</b>	<b>Place of issue:</b> Province / state & country	<b>Expiry Date:</b>	

In accordance with the Agency Agreement signed with UFA, I have verified the identity of the owner / signing authority (Part A) by examining the original, unexpired identification document recorded herein.

UFA Representative Signature: \_\_\_\_\_ UFA Representative: (Print Name) \_\_\_\_\_ Location: \_\_\_\_\_ Date: (YYYY-MM-DD) \_\_\_\_\_



\*Required field

Where the Co-Applicant in Part A is an individual, each and every Co-Applicant of such Applicant, if any, must complete this Part B.

**CO-APPLICANT INFORMATION**

First name:*		Middle name:	Last name:*	
Address:*				
City / town:*		Prov / state:*		Postal code / Zip:*
Years At this Address:* _____ (Own / Rent / Living with Parents / Other)				
Phone #:*		Phone #2:		Fax #:
Email Address:			Date of Birth:*	Social Insurance # (SIN):
Mother's maiden name (For security):*			Marital status:*	
Are You A: * <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Other (Please Specify) _____				

**CO-APPLICANT EMPLOYMENT DETAILS**

Present Employer: If different than your Applicant company		Work Phone #:	Income per Annum (\$):
Occupation / Position: Required if applicable		Length of time with Present Employer: _____ Years _____ Months	
Employment status: <input type="checkbox"/> Permanent <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary		Full-time or Part-time: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	
Previous Employer: Required if less than 2 years with present employer		____ This is your first job <input type="checkbox"/> You are a student	
Other sources of income: Second job, home business, etc		Income per Annum (\$):	

**CO-APPLICANT DISCLOSURES**

Have you ever filed for personal bankruptcy or had a judgment against you?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will this account be used to conduct transactions on behalf of any other party than those named in the account information section?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**CO-APPLICANT CREDIT DETAILS**

Name of Primary Bank:*		Branch name / Transit number:*		
Address:		City / town:	Prov / state:	Postal code:
Account Manager:	Phone #:		Fax #:	
Chequing Account #:		Savings Account #:		
Operating Line limit(s) or Line of Credit limit(s) (\$):*		<input type="checkbox"/> Not Applicable	Amount(s) outstanding (\$): Required if applicable	
Term loans – Amount(s) outstanding (\$):*		<input type="checkbox"/> Not Applicable	Monthly payment(s)(\$): Required if applicable	
Mortgage Financing lender:*	<input type="checkbox"/> Own Rent	Value of Property (\$): Required if applicable		Amount outstanding (\$): Required if applicable
credit cards – total outstanding (\$): Required if applicable				
Primary UFA location: Required if applicable		Existing Fuel Provider:		City / town:



**CO-APPLICANT SIGNATURE (PART B)**

The Co-Applicant named above ("Co-Applicant") applies to UFA for an Account for the purchase of goods and/or services from UFA on the terms and conditions as set forth in Part E of this Credit Application and in accordance with the Account Agreement.

Co-Applicant acknowledges and agrees that credit will only be granted to the Co-Applicant upon our acceptance of this Credit Application, and only in the amount approved by us. Applicant acknowledges that we may, as a condition of acceptance of this Credit Application, require Co-Applicant to enter into a general security agreement with us. Upon our acceptance of this Credit Application, Co-Applicant agrees to be bound by the Account Agreement, and agrees to be jointly and severally liable with Applicant for their obligations under the Account Agreement. Each Co-Applicant and Applicant may hereafter give us instructions regarding the Account Agreement. We are not responsible for ensuring that there has been consensus among Co-Applicant(s) and Applicant with respect to such instructions.

By signing this Agreement, Co-Applicant authorizes us to collect, use and disclose personal information about Co-Applicant in order to, amongst other purposes, verify Co-Applicant's creditworthiness and process this Credit Application and, if this Credit Application is accepted, administer the Account, all in accordance with the UFA Privacy Policy.

This Credit Application may be executed in multiple counterparts, each of which shall be deemed to be an original document and all of which shall constitute one agreement. All counterparts shall be construed together and shall constitute one and the same agreement. This Credit Application, to the extent signed and delivered by means of electronic transmission (including, without limitation, PDF, facsimile and Internet transmissions), shall be treated in all manner and respects as an original document and should be considered to have the same binding legal effect as if it were the original signed version thereof delivered in person.

By signing below, Co-Applicant certifies that he or she has read, understand, and agree to the terms and conditions of this Credit Application and the Account Agreement.

Co-Applicant Signature: \_\_\_\_\_ Co-Applicant Name: (Please Print) \_\_\_\_\_ Date: (YYYY-MM-DD) \_\_\_\_\_

**IDENTIFICATION VERIFICATION**

Each individual that has signed "Co-Applicant Signature (Part B)" above must provide identification for this section. This section must be completed, verified, and signed by a UFA representative at a UFA Farm and Ranch Supply store or UFA Petroleum Agency.

Please record the particulars of one (1) piece of identification in original form. The Identification must be government-issued photo identification (e.g. driver's license, passport, firearms license).

<b>Name of Co-Applicant:</b>		<b>Type of Identification:</b>	
<b>Reference or Co-Account #:</b>	<b>Place of issue:</b> Province / state & country	<b>Expiry Date:</b>	

In accordance with the Agency Agreement signed with UFA, I have verified the identity of the owner / signing authority (Part A) by examining the original, unexpired identification document recorded herein.

UFA Representative Signature: \_\_\_\_\_ UFA Representative: (Print Name) \_\_\_\_\_ Location: \_\_\_\_\_ Date: (YYYY-MM-DD) \_\_\_\_\_



\*Required field

Each owner, shareholder or partner of the Applicant must complete and sign a separate Part C.

**OWNER / SHAREHOLDER INFORMATION**

Full legal Business name:*		Operating As:	
First name:*	Middle name:	Last name:*	
Social Insurance Number (SIN): Optional	Date of Birth:*\br/>yyyy-mm-dd	Mother's maiden name:*\br/>For security purposes	
Address:*			
City / town:*	Prov / state:*	Postal code:*	
Phone #:*	Phone #2:	Email Address:	
Occupation / Position:*	Your ownership Percentage:*	Income per Annum (\$):	
1. Are you either a Canadian citizen or permanent resident?*			<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you ever filed for personal or business bankruptcy or had a judgment against you?*\br/>Please provide details (including year) if yes:			<input type="checkbox"/> Yes <input type="checkbox"/> No

**OTHER INCOME**

Present Employer: If different than your Applicant company	Work Phone #:	income per Annum (\$):
Occupation / Position: Required if applicable	Length of time with Present Employer: ____ Years ____ Months	
Employment status: (Permanent / Seasonal / Temporary)	Full-time or Part-time:	
Previous Employer: Required if less than 2 years with present employer	____ This is your first job ____ You are a student	
Other sources of income: Second job, home business, etc	Income per Annum (\$):	

**SIGNATURE (PART C)**

The undersigned hereby provides the information set out above on behalf of the Applicant identified in Part A of this Credit Application, for the purposes of an application by the Applicant for an Account for the purchase of goods and/or services from the UFA.

By signing below, the undersigned authorizes us to collect, use and disclose personal information about the undersigned in order to, amongst other purposes, verify the creditworthiness of the Applicant and process this Credit Application and, if this Credit Application is accepted, administer the Account, all in accordance with the UFA Privacy Policy.

This Credit Application may be executed in multiple counterparts, each of which shall be deemed to be an original document and all of which shall constitute one agreement. All counterparts shall be construed together and shall constitute one and the same agreement. This Credit Application, to the extent signed and delivered by means of electronic transmission (including, without limitation, PDF, facsimile and Internet transmissions), shall be treated in all manner and respects as an original document and should be considered to have the same binding legal effect as if it were the original signed version thereof delivered in person.

Signature \_\_\_\_\_ Name (Please Print) \_\_\_\_\_ Date: (YYYY-MM-DD) \_\_\_\_\_

**IDENTIFICATION VERIFICATION**

This Identification Verification section must be completed, verified, and signed by a UFA representative at a UFA Farm and Ranch Supply store or UFA Petroleum Agency.

Please record the particulars of one (1) piece of identification in original form. The Identification must be government-issued photo identification (e.g. driver's license, passport, firearms license).

Name of owner / Signing Authority:	Type of Identification:	
Reference or Account #:	Place of issue: Province / state & country	Expiry Date:

I have verified the identity of the owner / signing authority (Part A) by examining the original, unexpired identification document recorded herein.

UFA Representative Signature: \_\_\_\_\_ UFA Representative: (Print Name) \_\_\_\_\_ Location: \_\_\_\_\_ Date: (YYYY-MM-DD) \_\_\_\_\_





**NEW CARDLOCK APPLICATION**

UFA Account #:  
(To be completed by UFA)

**UFA cardlock card**  
Access to UFA's Network, OAC

**UFA / CFN co-Branded card**  
Access to UFA's Network, and CFN Participating BC and US truck stop network access, OAC.


**UFA Fuel link card**  
Visa / Mastercard

cards	Cardlock Prompts	Product information	Tax Exemption information
<p><b>How many cards would you like?</b></p> <p>_____</p>	<input type="checkbox"/> Odometer prompt	<input type="checkbox"/> Diesel <input type="checkbox"/> Clear <input type="checkbox"/> Dyed**	_____ AFFB No.:
	<input type="checkbox"/> Unit # prompt	<input type="checkbox"/> Regular <input type="checkbox"/> Clear <input type="checkbox"/> Dyed**	_____ TEFU No.:
	<input type="checkbox"/> Emboss unit # on cards	<input type="checkbox"/> Premium <input type="checkbox"/> Clear	_____ SFTX No.:
		<input type="checkbox"/> Propane**	_____ BCREf No.:
		**User must have a valid permit	_____ PGAC No.:
			_____ PGAC Expiry:

In addition to having your business name embossed on each card, you also have the ability to add one additional line for other important information such as unit number, driver's name or ID number (maximum of 20 characters)

Card #1	Card #11
Card #2	Card #12
Card #3	Card #13
Card #4	Card #14
Card #5	Card #15
Card #6	Card #16
Card #7	Card #17
Card #8	Card #18
Card #9	Card #19
Card #10	Card #20

Yes! Please call me to discuss further customization options for my cards!



**Questions?**

Please contact UFA's Cardlock Services Representatives at  
**1-877-258-4500**  
and select Option 3



**TERMS AND CONDITIONS OF THIS APPLICATION**

In Section 1, "you" refers to each Applicant that completed Part A of the Credit Application, and, if applicable, each Co-Applicant that completed Part B of the Credit Application.

In Section 2, "you" refers to each owner, shareholder or partner that signed Part A of this Credit Application on behalf of the Applicant that is a corporation, partnership, sole proprietor or other entity, if applicable.

**1. General Terms.** By signing this Credit Application, each of you:

- a) certify that the intended use of the Account is to purchase petroleum products, crop inputs, farm and ranch supplies, clothing, tools, building supplies and other products and services from the UFA;
- b) acknowledge that our supply of credit to you forms indebtedness owed to us;
- c) certify that the information in this Credit Application is true, complete and accurate, knowing that we will be relying on such information in processing your application and if approved, to open and administer the Account or provide other products or services to you;
- d) certify that you are of age of majority in the province or territory in which you reside;
- e) certify that any documents submitted by you in association with this Credit Application are true, correct and complete;
- f) undertake to timely provide us with any change in your address or other information about you when any change occurs, and will give us such other information about you as may be required by us from time to time to keep our records up to date;
- g) authorize us to check the information you have provided us from time to time, and authorize and direct any person we may contact in this regard to provide us with such information;
- h) authorize us to collect, use disclose personal information about you in accordance with the UFA Privacy Policy, and that you will abide by such Privacy Policy;
- i) acknowledge that we may transfer or assign to any person or organization any of our rights, interests and obligations under the account at any time without prior notice or consent from you;
- j) agree that if we do not approve of the credit limit for which you have applied, this Credit Application is for the credit limit for which you qualify.
- k) acknowledge and agree that you have read and understand the terms and conditions of this Credit Application and the Account Agreement, that your use of the Account confirms your acceptance of such Account Agreement, and you had the opportunity to seek and were not prevented or discouraged by any other party from seeking independent legal advice prior to the execution and delivery of this credit application and the Account Agreement and that, if you did not avail yourself of such opportunity prior to signing this credit application and the Account Agreement, you did so voluntarily without any undue pressure and agree that any such failure to avail yourself of independent legal advice shall not be used by you as a defense to the enforcement of your obligations under this Credit Application and the Account Agreement.

**2. Additional Terms.** By signing this Credit Application, each of you:

- a) certify that you are, acting alone, authorized to sign this Credit Application and have the power to legally bind the Applicant in all respects including, without limitation, the signing of agreements, cheques and other documents, and the borrowing of money.
- b) certify that the Applicant is authorized by its governing legislation to borrow money, has the corporate and legal power and capacity and has taken all corporate action to validly authorize the borrowing of money, and there are no provisions in any incorporating documents or by-laws or corporate or shareholder or partnership agreements or other loan agreements which impair in any way the powers of the Applicant to borrow money and you will use your best efforts to advise us should this certification fail to be true and accurate at any time; and
- c) certify that no event has occurred and is continuing, and no circumstance exists which has not been waived, and which constitutes a default or event of default in respect of any material commitment, agreement or any other instrument to which Applicant is now a party or is otherwise bound, entitling any other party thereto to accelerate the maturity of amounts of principal owing thereunder, or terminate any such material commitment, agreement or instrument and you will use your best efforts to advise us should this certification fail to be true and accurate at any time.

For assistance on how to complete this credit application, contact UFA's Credit Specialist at  
**1-877-258-4500**  
 and select Option 2.

Applications may be sent in by fax to 403-570-4025

**or**

Dropped off at any UFA Farm and Ranch Supply store or UFA Petroleum agency.

**or**

Mailed directly to UFA:  
Attn: UFA Credit Department  
Suite 700, 4838 Richard Road SW, Calgary, AB T2H 2J9

**or**

Email to [credit.applications@ufa.com](mailto:credit.applications@ufa.com)

**A UFA REPRESENTATIVE MUST VERIFY YOUR ID**

**BEFORE YOUR APPLICATION CAN BE PROCESSED**



### Consent to Electronic Delivery of Documents

This Part must be completed by an Applicant if it wishes to receive documentation with respect to the Account electronically rather than by paper form.

The following agreement and consent (this "Consent") will govern the electronic delivery of Legal Information (as defined below) to you. You must review this Consent and confirm your acceptance at the bottom.

1. **Definitions.** In this Consent:
  - a) "Account" means your UFA credit on account in respect of which are you consenting to receive Legal Information electronically;
  - b) "Legal Information" means documents that we are required to send to you in connection with your Account, including but not limited to monthly statements, the Disclosure Statement, the Account Agreement, the UFA Privacy Policy, this Consent, any amendments to the foregoing, and any amendments to any other agreement entered into by you or us with respect to the Account;
  - c) "MyUFA" means the customer portal for UFA Accounts available on UFA's website;
  - d) "UFA" means the United Farmers of Alberta Co-operative Ltd., and its successors and assigns;
  - e) "You" and "your" means the person who is authorized to act with respect to the Account;
  - f) "We", "us" and "our" means the UFA and its successors and assigns.
2. **Consent.** You consent to the electronic delivery of the Legal Information on the terms and conditions of this Consent, rather than in paper form. This consent applies to all extensions, renewals and amendments related to the Account.
3. **Verbal Consent.** If you verbally consent to the electronic delivery of documents, we will confirm your consent by sending you these terms and conditions through electronic delivery through MyUFA, by e-mail, or through paper delivery. If you do not agree to these terms and conditions, you must immediately revoke your consent as provided under section 7 below.
4. **Electronic Delivery of Documents.** We may deliver Legal Information to you electronically through MyUFA or by e-mailing it to the e-mail address we have on record for you.
5. **Your Obligations.**
  - a) You agree to access MyUFA and your e-mail account at least monthly to review any electronic documents. You confirm that you have the necessary technical ability and electronic resources to do so. You acknowledge that any technical and security requirements for access to the Legal Information may change from time to time. You are responsible for informing us of any changes to your e-mail address.
  - b) If you are unable to access the Legal Information to meet your obligations under this section for any reason, you should revoke your consent as provided under section 7 below.
  - c) Any document delivered electronically to you under this consent will be deemed to be received by you when it is posted to MyUFA or on the date we e-mail such document to you, even if you do not access MyUFA or your email account for any reason.
6. **Providing Documents by Paper.** We reserve the right to provide you with Legal Information by paper delivery if we are unable to provide electronic delivery, have reason to believe you may not have received the electronic document, or otherwise consider it appropriate. Any paper delivery will be provided to you at the most current mailing address that we have on record for your Account.
7. **Revoking Consent.** You may revoke your consent to electronic delivery of documents at any time:
  - a) by changing the consent option on MyUFA online;
  - b) by calling us at 1-877-258-4500;
  - c) by visiting a UFA Farm and Ranch Supply Store or UFA Petroleum Agency.

We will send you a confirmation that we have received your revocation and specify when it takes effect through electronic delivery or through paper delivery. It may take up to 10 business days for your revocation to take effect. If a statement, notice or communication is being issued by us less than 10 business days after we receive your revocation, you may still receive an electronic statement, notice or communication.
8. **Contact Information.** You shall advise us of any changes to your e-mail address that you have on record with us.
9. **Changes to this Consent.** We may amend this Consent at any time by providing you with written or electronic notice.

If you are an Individual:

Signature \_\_\_\_\_ Name (Please Print) \_\_\_\_\_ Date: (YYYY-MM-DD) \_\_\_\_\_

If you are a corporation, partnership, sole proprietor or other entity:

Name: \_\_\_\_\_

Per: \_\_\_\_\_  
Signature Name (Please Print) Date: (YYYY-MM-DD)

Per: \_\_\_\_\_  
Signature Name (Please Print) Date: (YYYY-MM-DD)