FARMERS CO-OP OIL COMPANY CREDIT APPLICATION

APPLICANT INFORMATION											
First Name:	Last Name:	Ho	me Phone:								
Current Address:	City: _		State:	Zip Code:							
Years at current address :	O Rent or O Own F	Previous Fuel Supplier :									
EMPLOYMENT INFORMATION											
Employer:			Phone:								
Occupation:		Number of Years:									
Business Address:	City: _	:	State:	_ Zip Code:							
	BANK & TRA	DE REFERENCES									
Name:	Add	ress:									
Name:	Add	ress:									
Name:	Add	ress:									
	GENERAL	INFORMATION									
Products you plan to purchase include: I am looking for a starting 30-day credit limit of:											
•	Station Gas/FuelsShop Work (Renville)Tire Work (Renville)	\$0 - \$200\$201 - \$500\$501 - \$1,000		1,001 - \$2,000 \$2,001 - \$							
If account is approved, you	would like to receive a cardtrol card	for:									
Card 1: O Gas Only O Dies	el Only O Both Card 2: O Gas Only	O Diesel Only O Both Ca	rd 3: O Gas Onl	y O Diesel Only O Both							
	AUTHORIZ	ED SIGNATURE									
	dit information from the bank and bu it report from Equifax or Credit Burea										
Signature:	Print Name:		Date	:							

Form W-9
(Rev. August 2013)
Department of the Treasury
Internal Payenus Service

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

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	Nam	Name (as shown on your income tax return)										
2.	Busi	Business name/disregarded entity name, if different from above										
page,												
n pa	Che	Check appropriate box for federal tax classification:					Exemptions (see instructions):					
e JS		☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate										
ţţ.		Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) 🗈					Exempt payee code (if any)					
Print or type Specific Instructions on							Exemption from FATCA reporting code (if any)					
는 그 근 그	☐ Other (see instructions) ☑											
ċį	Addı	Address (number, street, and apt. or suite no.) Requester's name and apt. or suite no.)				and address (optional)						
Spe												
See	City,	ity, state, and ZIP code										
0)	Liet	account number(s) here (optional)										
	LIST	account number(s) here (optional)										
Par	t I	Taxpayer Identification Number (TIN)										
						ecurity number						
to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a												
		en, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other sour employer identification number (EIN). If you do not have a number, see How to ge	ta		-		-	1				
TINO												
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose				ploye	r identification number							
number to enter.												
Par	t II	Certification										
		alties of perjury, I certify that:										
1. Th	e nun	nber shown on this form is my correct taxpayer identification number (or I am waiting for a	a number to b	be iss	ued to	me),	and					
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue												
		(IRS) that I am subject to backup withholding as a result of a failure to report all interest or er subject to backup withholding, and	or dividends,	or (c)	the IR	RS ha	s notif	ed m	e tha	t I am		
3. la	mal	J.S. citizen or other U.S. person (defined below), and										
		rcA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	ng is correct.									
		on instructions. You must cross out item 2 above if you have been notified by the IRS th	J		y subj	ect to	backı	ıp wit	hholo	ling		
		ou have failed to report all interest and dividends on your tax return. For real estate transa										
		d, acquisition or abandonment of secured property, cancellation of debt, contributions to a										
-		payments other than interest and dividends, you are not required to sign the certification, less on page 3.	out you must	, biov	iue yol	ai COI	rect I	.IV. O	ce lile	=		
Sign		Signature of										
Here	.	· ·	to 🕨									

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at *www.irs.gov/w9*. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- · An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

FARMERS CO-OP OIL COMPANY CREDIT APPLICATION

Dear Patron,

To comply with Federal laws in reporting 1099 patronage dividends, we must also report the Social Security Numbers of all patrons receiving dividends. If this is not reported, the Internal Revenue Service will now assess your cooperative a \$50 penalty for each patron not having a Social Security Number or Federal Identification Number.

To comply with Federal law and to avoid a \$50 penalty from the IRS, we must have your signature and Social Security number or Federal Identification Number. Your cooperative refunds need to be included as income on your tax return only if you deduct the cooperative purchases as a business expense.

CREDIT POLICY

If payment of the cash sale price of any purchase is received prior to the closing date of the second monthly billing cycle following purchase, you will pay no FINANCE CHARGE on the purchase. The closing date is the last day of each calendar month. A FINANCE CHARGE will be imposed on the Past Due Balance, which is determined by deducting all payments and credits during the current monthly billing cycle from Previous Balance. The Previous Balance is the unpaid balance at the beginning of the monthly billing cycle. The monthly Periodic Rate used to compute the FINANCE CHARGE is 1.50%. It is applied to the Past Due Balance and becomes an ANNUAL PERCENTAGE RATE OF 18%. If your account is deemed uncollectible by the cooperative and is sent for outside collection you will be charged a percentage of the fees incurred by Farmers Co-op Oil Co in pursuit of collection debt.

This cooperative pursuant to its Articles of Incorporation and By-laws, has first lien on the capital stock of equities of the cooperative held by you for any debt due by you that is deemed otherwise uncollectible by your Board Of Directors.

Sincerely,

Scott Walker General Manager