

# SK LIVESTOCK FINANCE CO-OPERATIVE LTD.

## D-01.2 CORPORATE MEMBERSHIP APPLICATION FORM

By providing information on this form, you are giving SK Livestock Finance Co-operative Ltd. and its lender consent to use your information for program delivery, development and/or evaluation purposes.

**APPLICATION TO:** SK Livestock Finance Co-operative Ltd. (SKLF)

The corporation hereby applies for membership to SKLF. The sum of \$150.00 is included for the corporation's membership application fee. Upon becoming a member, the corporation and each shareholder agrees to abide by the rules and regulations of SKLF and certifies that (please check one):

- The corporation has never been a member of a historical Livestock Loan Guarantee Program association.
- The corporation is/was a member of the \_\_\_\_\_ association of the historical Livestock Loan Guarantee Program until the year \_\_\_\_\_.

<i>If applicable.</i>	Cattle	Bison
LLG Historical Feeder Limit	\$	\$
LLG Historical Breeder Limit	\$	\$

	Cattle	Bison
SKLF Requested Feeder Limit	\$	\$
SKLF Requested Breeder Limit	\$	\$

Please note that:

- All membership applications, including requests to increase financial assistance, are subject to approval of SKLF's General Manager, credit check and other requirements.
- The maximum corporate member loan limit (for feeder and breeder options combined) cannot exceed \$1,500,000.

The applicant, including each shareholder, hereby authorizes:

- SKLF and SKLF's lender to each release to and collect information from each other and from any other person, corporation (including any other financial institution), government or entity (collectively "other person"); and
- any other person to release to SKLF and SKLF's lender any of the applicants' or shareholders' financial or other personal information reasonably required to determine the applicant's and shareholders' suitability for membership in SKLF, for financial assistance, or to increase financial assistance, to be made to SKLF on behalf of the applicant or shareholders.

The corporation and each shareholder certifies that none are: an undischarged bankrupt, in litigation with any other person or, before the Farm Debt Mediation Services or the Farm Land Security Board (Farm Security Programs) and there are no unsatisfied judgements against outstanding.

Company Name	Date of Incorporation	
Company Primary Contact	Email Address	
Address	City/Town	Postal Code
Company Phone	Company Fax	

SHAREHOLDERS INFORMATION *Attach separate sheet to list additional shareholders (all must be listed).*

1.

OPTIONAL

Print Name in Full	Date of Birth (MM/DD/YYYY)	Social Insurance Number
Address	Postal Code	Premise Identification # (PID)
Email Address	Cell Phone	Business Phone
Quarter _____ Section _____ Township _____ Range _____ Meridian _____; in RM # _____		
<input type="checkbox"/> I consent that I am current on my utility bills and property taxes		<input type="checkbox"/> I provide consent for SKLF to run a credit check
Applicant's Signature	Date (MM/DD/YYYY)	

2.

OPTIONAL

Print Name in Full	Date of Birth (MM/DD/YYYY)	Social Insurance Number
Address	Postal Code	Premise Identification # (PID)
Email Address	Cell Phone	Business Phone
Quarter _____ Section _____ Township _____ Range _____ Meridian _____; in RM # _____		
<input type="checkbox"/> I consent that I am current on my utility bills and property taxes		<input type="checkbox"/> I provide consent for SKLF to run a credit check
Applicant's Signature	Date (MM/DD/YYYY)	

3.

OPTIONAL

Print Name in Full	Date of Birth (MM/DD/YYYY)	Social Insurance Number
Address	Postal Code	Premise Identification # (PID)
Email Address	Cell Phone	Business Phone
Quarter _____ Section _____ Township _____ Range _____ Meridian _____; in RM # _____		
<input type="checkbox"/> I consent that I am current on my utility bills and property taxes		<input type="checkbox"/> I provide consent for SKLF to run a credit check
Applicant's Signature	Date (MM/DD/YYYY)	

4.

OPTIONAL

Print Name in Full	Date of Birth (MM/DD/YYYY)	Social Insurance Number
Address	Postal Code	Premise Identification # (PID)
Email Address	Cell Phone	Business Phone
Quarter _____ Section _____ Township _____ Range _____ Meridian _____; in RM # _____		
<input type="checkbox"/> I consent that I am current on my utility bills and property taxes		<input type="checkbox"/> I provide consent for SKLF to run a credit check
Applicant's Signature	Date (MM/DD/YYYY)	

**Corporate Bank Reference**

Bank Name		Account Manager	Account #
Address	City	Province	Postal Code
Country	Telephone	Fax	Email

**Corporate Industry References**

Company Name			Account Manager
Address	City	Province	Postal Code
Telephone	Fax	Email	

Company Name			Account Manager
Address	City	Province	Postal Code
Telephone	Fax	Email	

Company Name			Account Manager
Address	City	Province	Postal Code
Telephone	Fax	Email	

- All parties named herein consent to have SKLF follow-up with the references I have provided above
- All parties understand that Social Insurance Numbers (provided above) will be kept confidential by SKLF and will only be used for credit check purposes by SKLF
- All parties represent and warrant that they are currently up to date on my utility bills, property taxes and other taxes
- All parties represent and warrant they are currently in good standing with my financial institution(s)
- I consent to have SKLF follow-up with the references I have provided below
- I understand that, by signing this form, SKLF can communicate with me by email at the address provided on this form

*For existing members only...*

Please comment on whether you are currently branding or tagging your livestock. If you are branding, what brand(s) do you currently use and what location(s) are you branding?

**SIGNATURE AND DATE**

*Affix Corporate Seal Here*

\_\_\_\_\_  
Corporate Signing Officer

\_\_\_\_\_  
Date

SKLF Approval: \_\_\_\_\_

Date: \_\_\_\_\_