

Box 560 Vanderhoof, British Columbia V0J 3A0 Canada Phone (250) 567-4414 Toll Free 1-877-567-4414 Fax (250) 567-4355 LOCALLY INVESTED COMMUNITY MINDED LIFETIME MEMBERSHIP BENEFITS

CONSUME	Four <b>R CRED</b>	Rivers Co-operative IT APPLICATION	MEMBER#
	API	PLICANT INFORMATION	
Name:			
Date of birth:		SIN:	Phone:
Current address (mailing & physical)			
City:		Province:	Postal Code:
			How long?
Previous address if under 2 years at curr	ent		
City:		Province:	Postal Code:
Email:			How long?
	EMP	LOYMENT INFORMATION	
Current employer:			
Employer address:			How long?
Phone:	E-mail:		Fax:
City:		Province:	Postal Code:
Position:			Annual income:
Previous employer if under 2 years at cu	rrent		
Address:			How long?
Phone: E-mail:			Fax:
City:		Province:	Postal Code:
Position:			Annual income:
CO-APP	LICANT INF	ORMATION, IF FOR A JOINT	ACCOUNT
Name:			
Date of birth:		SIN:	Phone:
Current address:			
City:		Province:	Postal Code:
			How long?



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		THEODMATION
CO-APPLICANT	EMPLOYMENT	INFORMATION

Current employer:			
Employer address:			How long?
Phone:	E-mail:		Fax:
City:		Province:	Postal Code:

HAVE YOU BEEN DISCHARGED FROM BANKRUPTCY IN THE LAST 6 YEARS? YES\_\_\_\_ NO\_\_\_\_

Previous Co-op Account yes no (Please circle answer) if yes previous account number\_\_\_\_\_

### **Credit Limit requested**

#### Number of fuel cards required

Please read, date and sign

I/we certify that the above information is true. I/we certify that i/we are entering into this credit agreement primarily for the personal, family and household purposes. 1/we are at least the minimum adult age. I/we understand the Co-op may accept or reject this application. If this credit application is accepted I/we are bound by the co-op's consumer credit agreement and statement of disclosure and any amendments or replacements which Co-op sends me. I/we have retained a copy of the consumer credit agreement and statement of disclosure. If the co-op has service cards, I/we request a co-op service card to be issued to myself and the co-applicant set out below. Where a co-applicant signs this application with me, we acknowledge that the terms of this application and all consents given in it bind both of us. We agree to be jointly and individually liable, which means we are liable both individually and together for all amounts charged to the account

I/we consent to the exchange of account and credit information and personal information from time to time by the Co-op and the financial references provided to the exchange of credit information with any credit grantor, credit bureau, credit reporting agency or my/our employer(s)

Signature of applicant	Date
Signature of co-applicant, if for joint account	Date

Name on credit application MUST match name on membership



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### Four Rivers Co-operative Consumer Agreement and Statement of Disclosure

In consideration of the Co-op accepting your credit application, which forms part of this agreement, and opening an account in your name and, when

applicable, issuing a service card (the "card") to you and to the co-applicants, if requested, you agree to the credit terms set out below.

#### 1. Types of Credit Accounts/Use of the Card

- (1) Under a charge account, credit is extended for new purchases (i.e., a purchase not shown on a previous statement) to the Due Date shown on the statement. No interest is charged on new purchases when the Co-op receives payment in full by the Due Date. Under a dating account, credit is extended for new purchases beyond 30 days to the Due Date shown on the statement. No interest is charged on the purchases recorded in a dating account. When due, the purchases in the dating account are transferred to the charge account and interest is charged at the interest rate on the charge account if the amount transferred is not paid on or before the Due Date.
- (2) The Card may be used to buy goods and services available on credit on these accounts from the Co-op.
- (3) The Card is the property of the Co-op. It is not transferable. You will immediately return all Cards if requested.
- (4) Upon cancellation or expiry, you will pay your accounts in full despite the cancellation or expiry of any rights and privileges under this agreement.
- (5) The Co-op has the right to cancel your credit accounts and the Card at any time, including, without limitation, upon your death or if you become bankrupt or insolvent.
- (6) You may make enquiries about your accounts during the Co-op's ordinary business hours by a local or collect call to the telephone number set out above.

#### 2. Credit Limit

- (1) The Co-op will advise you of your credit limit (the "Limit") by letter or in your first statement after acceptance of your credit application. The Limit may be increased or decreased at any time by the Co-op. The change will be disclosed in the next statement following the change. You hereby request any increase to the Limit at any time for which you may qualify.
- (2) You agree not to make purchases on your accounts where the amount of the purchase plus any balance then outstanding would in total exceed the Limit unless the Co-op, in its sole discretion, permits you to exceed the Limit, in which case the terms set out in this agreement apply to those amounts in excess of the Limit.

#### 3. Billing

- (1) The Co-op will send you a statement every month for purchases that have been made under your accounts during the previous month, and for any previous unpaid balance. Co-applicants and co-applicant cardholders will not receive statements.
- (2) Where anyone authorized by you signs a receipt bearing an imprint of your Card, or you or anyone authorized by you gives your account number to make a purchase without presenting the Card, you will be liable to pay as if the sales receipt was signed by you.
- (3) If you do not notify the Co-op in writing of an error or omission in your statement of account within 30 days of the statement date, you agree that the statement is considered conclusively to be correct.
- (4) Any adjustment made by means of a credit voucher will be credited to you, but until the time the credit voucher is granted and recorded, you are responsible to pay the amount to which it relates to the Co-op in accordance with this agreement.

#### 4. Interest and Payment

- (1) You agree to perform promptly all your obligations under this agreement.
- (2) You agree to pay the amount due in full on or before the due date appearing on each statement sent by the Co-op to you.
- (3) You have the right to prepay the entire balance in full or in part without charge.
- (4) You agree to pay interest to the Co-op on all past due amounts at the annual rate of <u>12 %</u>, both before and after demand, default, and judgment. This is the annual percentage rate on the charge account. This interest is added to the charge account and forms part of the amount due. This interest will bear interest on your next monthly statement (monthly compounding) if the amount due on the statement is not paid in full on or before the due date.
- (5) Payments will be applied by the Co-op in the following order: previously billed interest and purchases, interest and purchases shown on current statement, interest, and purchases to be billed.
- (6) You agree you are liable for the entire outstanding balance of your accounts despite any variation of interest terms by the Co-op.
- (7) In addition to the amounts otherwise payable under this agreement, you agree to pay the Co-op its charge for each cheque received by the Co-op from you that is subsequently dishonored.
- (8) Payments must be made only by cash, cheque, debit card or money order, or by other arrangement authorized by the Co-op.

Signature

Date



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#### 5. Default

- (1) You will be in default if any of the following occurs:
  - (a) you do not make a payment when due.
  - (b) a bankruptcy proceeding is filed by or against you or you are the subject of receivership or insolvency proceedings or any of your assets are seized.
  - (c) you have made a false or misleading representation on your Credit Application.
  - (d) you die.
  - (e) you breach any of your other agreements in this agreement.
  - (f) if the Co-op has reasonable cause to believe your ability to perform your obligations under this agreement, including making timely payments, is impaired.
- (2) Upon your default, the Co-op has the remedies in this agreement and at law. The Co-op may immediately suspend or cancel your privilege to obtain credit. The outstanding balance in your accounts will become due and payable ten days from the date the Co-op's written notice of the default or other event is sent to you.
- (3) You agree to pay all reasonable expenses, costs, and disbursements, including fees as between a solicitor and his or her own client, which may be incurred by the Co-op in the enforcement of its rights under this agreement.
- (4) You agree that taking of a judgment against you will not operate as a merger of your promise to pay or affect the right of the Co-op to collect interest at the rates notified to you from time to time on any amounts owing to the Co-op under this agreement or on the judgment.
- 6. Cancellation. You may cancel this agreement at any time by written notice.
- 7. Amendments. The Co-op may amend the provisions of this agreement including the interest rate by giving written notice to you of the change. The Co-op will notify you in writing of the amendment, which may be by notice on your statement. The amendment will be effective 30 days, or such greater time period as may be required by applicable laws, after the date notice is given. Unless you cancel your credit accounts within that notice period, the amendment(s) will be binding on you.
- **8. Notices.** Any notice required or permitted to be given to you under the terms of this agreement is sufficiently given if shown on your statement or if sent by prepaid first-class mail to the latest address contained in the Co-op's files. Unless otherwise provided in this agreement or by law, any notice so given will be considered to have been received by you on the 7th day after the date on which it was mailed. You agree to notify the Co-op promptly of any change of address. Notice to you or to a co-applicant cardholder is considered notice to all.

#### 9. Lost or Stolen Card(s)

- (1) Where the Card(s) used in connection with your account is (are) lost or stolen, you agree to notify the Co-op promptly, in writing.
- (2) You are responsible to pay for all product and services charged to your account until you have notified the Co-op as required.

#### 10. Co-applicants

- (1) Where a co-applicant signed the credit application with you, the terms of this agreement bind each of you and apply with whatever changes of grammar are necessary.
- (2) Where there are co-applicants, you agree that your liability for all amounts payable under the terms of this agreement is joint and individual, which means you are liable both individually and together for all amounts charged to the accounts.
- (3) Where you have designated co-applicant cardholder(s), you are responsible to the Co-op for all transactions made by co-applicant cardholder(s) with their Card(s).

#### 11. Miscellaneous

- (1) If any part of this agreement is contrary to law or found inoperative by any court, that part is ineffective without invalidating the other parts of this agreement.
- (2) This agreement will be governed by the laws of the province in which the Co-op is situated.
- (3) This agreement will be governed by the laws of the province in which the Co-op is situated.
- (4) You acknowledge receipt of a copy of this agreement at the time of signing the Consumer/Non-Corporate Farm Credit Application and before the extension of any credit or the use of the accounts.

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Signature	L
Dignatare	

Date



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### ACCOUNT ACCESS FOR INFORMATION REQUESTS ON YOUR ACCOUNT

FOUR RIVERS CO-OP MEMBERSHIP # \_\_\_\_\_

ACCOUNT NAME

ACCOUNT HOLDER SIGNATURE:

Names of who can access the information on your account:

Due to the privacy policy act, we require your permission on whom you wish to obtain this information. We do not want to give out information to the "wrong" person.

Please limit the individuals that you give permission to obtain your information to 3. This is strictly who can have access to information on your account.

COLOURED FUEL	
I am purchasing coloured fuel ONLY for the following authorize	ed uses ( <i>check ( ✓ ) all intended uses</i> ):
	<ul> <li>a commercial motor vehicle (other than a pick-up truck) when used off highway for transporting drilling rigs, equipment and supplies, fuel, water, well-servicing equipment/supplies for persons actively engaged in exploring or drilling for petroleum and natural gas</li> <li>farm vehicles that have a farm licence plate (also known as an "A" or "G" plate) when operated for farm purposes on a highway by, or on behalf of, a farmer</li> <li>a tractor when used on a highway for, or by, a farmer for the farmer's farm</li> <li>a motor vehicle used off highway by the logging industry, such as:         <ul> <li>trucks used for hauling logs or lumber</li> <li>crew crummies or buses used for the transportation of company employees, contractors or agents of the company, or employees of the contractors and agents</li> <li>fire trucks used as fire trucks</li> <li>a motor vehicle used off highway by the mining industry in a mineral/mining operation, such as:                 <ul> <li>trucks used for transporting minerals</li> </ul> </li> </ul></li></ul>
highway, including unlicensed snowmobiles and all-terrain vehicles (ATVs)	<ul> <li>crew crummies or buses used for the transportation of company employees, contractors or agents of the company, or employees of the contractors and agents</li> <li>fire trucks used as fire trucks</li> <li>ambulances used as ambulances</li> </ul>

#### MARINE DIESEL AND LOCOMOTIVE FUEL

I am purchasing (check (  $\checkmark$  ) if applicable):

marine diesel for use in a ship

locomotive fuel for use in a locomotive or other vehicle run on rails

#### CERTIFICATION

By signing this form, I certify that I will use fuel for the authorized use(s) identified above.

I acknowledge that if:

- I purchase or use coloured fuel for a purpose that is not authorized under the *Motor Fuel Tax Act*, I must pay tax in accordance with section 15(3) of the *Motor Fuel Tax Act* and I may be subject to penalties equal to the greater of:
  - three times the tax that would have been payable if the fuel had not been coloured, and
  - up to \$1,000 per day per vehicle.
- I make a false statement on a form required under the *Motor Fuel Tax Act*, I may be subject to a fine of up to \$10,000 and/or imprisonment for up to two years.

FULL LEGAL NAME OF THE PURCHASER	IF A BUSINESS, NAME AND TITLE OF SIGNING AUTHORITY	ACCOUNT NUMBER – For Seller's Use Only ( <i>if applicable</i> )
MAILING ADDRESS (include street or PO box, city, province and postal code)		TELEPHONE NUMBER
		( )
SIGNATURE		DATE SIGNED YYYY / MM / DD
x		

FIN 430/WEB Rev. 2015 / 7 / 9



GENERAL INQUIRIES Toll-free in Canada: 1 877 388-4440 Email: FuelTax@gov.bc.ca

For more information, please see **Bulletin MFT-CT 003**, *Coloured Fuels* or visit our website at **gov.bc.ca/salestaxes** and go to **Motor Fuel Tax and Carbon Tax** 

#### **INSTRUCTIONS FOR SELLERS**

You must obtain a completed and signed copy of this certification form before you sell coloured fuel, marine diesel or locomotive fuel to a purchaser for their own use:

- through a cardlock (including at a terminal rack or bulk plant), or
- in an amount greater than 45 litres.

You must keep this certification on file. You may make additional sales of fuel based on this certification if:

- · the information on this certification is current, and
- you can link each sale to this certification (e.g. by an account or reference number).

You do not need to obtain this certification if you:

- transfer the fuel directly into the supply tank of a ship that is in or on the water,
- sell the fuel to a farmer that has provided you a completed and signed *Certificate of Exemption* – *Farmer* (FIN 458), or a copy of their valid Farmer Identify Card issued by the BC Agricultural Council, or
- sell the fuel to a purchaser for resale (they must be an authorized coloured fuel seller to purchase coloured fuel for resale).

#### INSTRUCTIONS FOR PURCHASERS

If you are purchasing coloured fuel, marine diesel or locomotive fuel for your own use, you must complete this certification, or an alternative as described above in the case of a farmer, to certify that you will use the fuel for an authorized purpose. You must provide this form, or the alternative, **to the fuel seller.** 

If you do not provide this certification to the fuel seller before purchasing the fuel as required, you must pay tax at the clear motor fuel tax rate (i.e. the same rate as clear gasoline or clear diesel). The only exceptions are if:

- you are purchasing 45 litres of fuel or less,
- you are purchasing the fuel for resale, or
- the seller is transferring the fuel directly into the supply tank of your ship that is in or on the water.

#### COLOURED FUEL CERTIFICATION (INCLUDES MARINE DIESEL AND LOCOMOTIVE FUEL)

under the Motor Fuel Tax Act

Freedom of Information and Protection of Privacy Act (FOIPPA) The personal information on this form is collected for the purpose of administering the *Motor Fuel Tax Act* under the authority of section 26(a) of the FOIPPA. Questions about the collection or use of this information can be directed to the Manager, Program Services, PO Box 9442 Sth Prov Govt, Victoria BC V8W 9V4 (telephone: toll-free at 1 877 388-4440).

If a certification is required and you have not obtained one from a purchaser, you must collect tax from the purchaser on the sale of the fuel at the clear motor fuel tax rate (i.e. the same rate as clear gasoline or clear diesel) not at the rate of 3 cents per litre. For information on tax rates, see **Bulletin MFT-CT 005**, *Tax Rates on Fuels*. If the tax you collect is greater than the security you paid on the fuel, you must remit the additional tax.

If you sell coloured fuel, marine diesel or locomotive fuel without obtaining the required documentation and do not collect tax at the clear fuel rate, you may be subject to a penalty equal to the difference between the tax you collected and the tax you were required to collect, as well as additional penalties and interest.

**Please Note:** You may sell coloured fuel to a farmer exempt from motor fuel and carbon tax if:

- you are delivering the fuel to a storage receptacle on the farmer's farm or the farmer is purchasing on account from a terminal, bulk plant or cardlock, and
- the farmer provides you with one of the following:
   a completed and signed Certificate of Exemption
  - *Farmer* (**FIN 458**), or a copy of their valid Farmer Identify Card issued
    - by the BC Agricultural Council.

If you purchase coloured fuel and pay tax at the clear fuel rate because you did not complete this certification, you may be eligible for a refund. The refund is for the difference between the tax you paid and 3 cents per litre if you use the coloured fuel for an authorized use. For more information, please see **Bulletin MFT-CT 003**, *Coloured Fuels*.

**Please Note:** You cannot purchase coloured fuel for resale unless you are authorized as a coloured fuel seller. For more information, see **Bulletin MFT-CT 001**, *Fuel Sellers*.

## APPLICATION FOR MEMBERSHIP

# Four Rivers Co-operative

NO.

	FU	ul Kivel	s co-operative	, ("THE CO-OP")
(FULL NAME OF CO-OF	PERATIVE)			10
ON THIS THE			I hereby apply for membership in the Co-	op and apply for
common shares of th	e Co-op for a total price of \$	10.00	and request that you allot them to me.	
I understand that I will be of the Co-op, as amended	ome a member only after Board app from time to time. I agree that the ge refunds or dividends, for any mo	roval of this membe Co-op shall have a	ership application. Upon becoming a member, I agree to be lien on the equity which I may have at any time in the C ving by me to the Co-op. All shares and patronage refunds	o-op, including my shares and all
privacy policies and related to communicate with you;	d practices. The personal informatio to administer the Equity and Cash	n that you provide Back Program; to	that you provide to it by way of this Application for Me to the Co-op is being collected and will be used for one o open, maintain and administer your Co-op accounts; to o ducts or services by mail, telephone or other means.	r more of the following purposes:
The Co-op collects your So SIN if you have a pre-paid	cial Insurance Number ("SIN") beca	use the law require oplication for meml	es the Co-op to both report patronage allocations for inco bership cannot be processed without your SIN. Your date	
information for accounting has contract agreement in that information which is	and rebate purposes and for resear place for the purposes of managing necessary to perform the required s	ch and marketing p your personal inform ervices. Other than	time to time disclose your personal information to FCL to urposes. FCL may need to disclose your personal informal mation such as data collection and processing companies. In the disclosure of your personal information to FCL for the ur consent, except where permitted or required by law.	tion to third parties with whom it The Co-op provides FCL with only
You may withdraw your co consent may mean that the corrections to it, or ask que	onsent for the use of your personal e Co-op is unable to provide you with	l information by the some or all of the some or all of the solution legal or contracts	e Co-op unless legal requirements prevent this. Please m services that you may receive otherwise. You may access you al requirements) by contacting the Co-op's Privacy Office	our personal information, request
Yes, you may contact r	me for research or marketing purpos	es. 🛛	No, do not contact me for research or marketing purpose	15.
I understand that by signin	g this application form I am consent	ing to the collectio	n of my personal information and to its use and disclosure	for the stated purposes.
	SIGNATURE OF WITNESS		SIGNATURE OF APPLICANT OR CORPORAT SIGNING OFFICER	re
SURNAME/BUSINESS NAI	ME			
[				
FIRST NAME			EMAIL ADDRESS	
ADDRESS I				
ADDRESSII				
	Y			
CITY		PR	OVINCE POSTAL CODE COU	
				IF NOT CANADA
ZIP CODE - IF NOT CANAL		· · · ]	SOCIAL INSURANCE NO. TELEPHON	E NUMBER
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			MEMBERSHIP	

NUMBER\_

#### DATE ACCEPTED BY BOARD\_

Original - To Accounting; Duplicate - To Applicant; Triplicate - Retain in Book.