

# FIFTEEN (15) DAY CREDIT APPLICATION

for

LONDON SELECTED YEARLING SALE

33618 Roman Line, R.R. #3, Lucan, ON N0M 2J0

(519)319-0650 sale days phone

All purchases must be paid for at the time of sale. However, if you complete this credit application and return it to the sales office, and you have subsequently received advice from London Selected Yearling Sale that this credit application has been approved by London Selected Yearling Sale prior to the commencement of the sale, you will be provided a release for your purchases with the acknowledgement that you will make payment for your purchases in full within fifteen (15) days of the sale. London Selected Yearling Sale cannot extend credit to buyers other than through this approval of fifteen (15) day credit. All credit purchases are subject to the Conditions of Sale, including Condition #9 for Default. All purchases must be insured with full mortality insurance on a first dollar basis with London Selected Yearling Sale named as loss payee.

Date \_\_\_\_\_

Amount of Credit Requested \$ \_\_\_\_\_

Purchases will be in the name of \_\_\_\_\_

Person Responsible for Account \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State or Province \_\_\_\_\_

Postal Code \_\_\_\_\_

Standardbred Canada License # \_\_\_\_\_

ORC License \_\_\_\_\_

Telephone Home (    ) \_\_\_\_\_

Cell (    ) \_\_\_\_\_

Email \_\_\_\_\_

## To be completed by Bank Officer

The credit applicant whose signature is below has had an account with this bank for \_\_\_\_\_ years, and remains in good standing with our banking establishment.

Applicant Account Number \_\_\_\_\_

Bank Officer's Name \_\_\_\_\_

Title \_\_\_\_\_

Name of Bank \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State or Province \_\_\_\_\_

Postal Code \_\_\_\_\_

Telephone (    ) \_\_\_\_\_

Fax (    ) \_\_\_\_\_

Bank Officer's Signature \_\_\_\_\_

Date \_\_\_\_\_

By signing this form, applicant authorizes London Selected Yearling Sale to perform a credit investigation and if applicant is not an individual, the undersigned agrees to be personally responsible to London Selected Yearling Sale for payment of the applicant's account pursuant to the Conditions of Sale. Please notify your bank that a representative of the London Selected Yearling Sale will be contacting the bank about your request for credit.

Applicant Signature \_\_\_\_\_

PLEASE SUBMIT THIS APPLICATION BY SEPTEMBER 30, 2020.