

The following information is given for the purpose of obtaining credit from:
Mercer Landmark, Inc or Heartland Feed Services LLC 426 W Market Street, P.O. Box 328, Celina OH 45822
Phone **567-890-9927** * Fax **419-586-8893** * Email glenda@mercerlandmark.com



CONSUMER CREDIT APPLICATION

APPLICANT: (please print)

CO-APPLICANT: (please print)

Last Name First Name Initial

Social Security # Date of Birth

Current Living Address & Mailing Address, if different

City State Zip

Daytime Phone # Cell Phone #

Email Address

Employer Name & Phone # # of Years

of years owned

Renters' Name & Phone Number (if rental)

Last Name First Name Initial

Social Security # Date of Birth

Current Living Address & Mailing Address, if different

City State Zip

Daytime Phone # Cell Phone #

Email Address

Employer Name & Phone # # of Years

of years owned

Renters' Name & phone number (if rental)

*** If purchases are for a rental property, the account must be in owner's name and owner must complete credit application**

CREDIT REFERENCES:

Bank where mortgage is held Bank where checking account is held Bank where savings account is held

Phone number of bank Phone number of bank Phone number of bank

Requesting Credit For: (mark all that apply)

- Propane/LP Gas
- Gasoline/Diesel
- Fuel Oil/Heating Fuel
- General Supplies

Tax Status (check one)

- Taxable
- Tax Exempt (if exempt, please supply certification)

Credit Limit Request: \$ _____

Sales Advisor: _____

