



Dawson Co-operative Union

110 – 10200 – 8th Street
Dawson Creek, BC V1G 3P8

Phone (250) 782-4858
Fax (250) 782-6017



Credit Application Instructions Commercial

Step 1: Complete commercial/corporate farm credit application

- Complete this form if you are an incorporated company or a farmer whose farm is a limited company.
- If you already have a member number with the Dawson Co-operative Union, enter it in the box marked member number. If you do not have a member number, please complete the membership application and a member number will be assigned to you upon approval.
- Complete Section 1 with your company's information including your CRA business number for allocating patronage and taxes withheld to your CRA account.
- If you are a farmer who has exemptions for purchasing fuel, please ensure that you use the same name in the credit application.
- Complete the Business Information in Section 2. Please include your Accounts Payable contact's email to receive pdf copies of the account statement as paper copies will not be mailed
- Complete the References in Section 3.
- If completing the application as a farm, complete Section 4 on Farm Information (including acres farmed and legal land location).
- Complete Section 5 which includes the credit limit being requested.
- **Sign and date the application**

Step 2: Read and Sign the Commercial Credit Agreement and Statement of Disclosure.

Step 3: Add supporting documents required

- Include the most recent financial statement for the company (required for limits over \$30,000)
- If you have been incorporated for less than two years, please provide a completed pre-authorized debit or credit application
- If you are located outside our trading area (Dawson Creek, Chetwynd and Tumbler), we require the account to be either prepaid or set up for pre-authorized debit or credit – Please complete either form if this is your situation.

Step 4: Send completed forms and required supporting documents to the administration office by way of three options:

1. Mail to: Dawson Co-operative Union, 110-10200 8th Street, Dawson Creek, BC V1G 3P8
2. In person at the Administration Office in the Co-op Mall. Hours of operation are Mon-Fri 8:00AM-5:00PM
3. Email to: ar@dawsonco-op.com

Step 5: Approval of Credit.

- The Administration office will email you a letter regarding the status of your approval.
- Upon approval, the letter will include instructions on how to get your cardlock cards (if applicable).



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Member number: _____

1. Identification

Legal name of corporation: _____

Trade name/Business name (If different from above): _____

Address (if P.O. Box Street Address as well) _____

City/Town _____ Province _____ Postal Code _____

Email address: _____

2. Business Information

Nature of Business _____ GST No. _____ PST No. _____

Length of time in business _____ Years Incorporation Date: _____ ***Provide a copy of the Certificate of Incorporation**

***If less than 2 years, the Co-op requires a preauthorized form of payment method or a prepaid account.**

Accounts Payable Contact _____ Telephone No. (____) _____ Email: _____

Financial Statements for the Year of _____ Prepared. Will provide Copy YES NO Attached

***Copy of Financials Statements prepared by an accounting firm must be provided if requesting credit exceeding \$30,000.**

Financial Information Provided will be held in strict confidence and used for Credit Purposes Only.

Officers, Partners or Owner's Name	Title	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If a Subsidiary, Branch or Division, please state Parent Company

Name _____

Address _____

City/Town _____ Province _____ Postal Code _____ Email _____

Telephone No. (____) _____ Fax No. (____) _____

3. References

Financial Institution _____ Account Manager _____

Address _____ Telephone No. (____) _____

Current Trade/Fuel Suppliers Name	Address	Telephone
1. _____	_____	(____) _____
2. _____	_____	(____) _____
3. _____	_____	(____) _____

Are there any legal actions pending against you or your partner(s)? YES NO

Have you or your partner(s) been discharged from bankruptcy in the last 6 years? YES NO



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4. Complete this Portion for Corporate Farm Use

Legal Description of Land _____ Section(s) _____ Township _____ Range _____ West of _____ Meridian _____

How long have you farmed? _____ Acres Farmed _____ Is Livestock financed through a 3rd party? _____

If so, who? _____ Number of Livestock _____ Processor _____

Hatchery _____ Quota _____ Check One Owner Tenant

Name of Mortgage Co. or Landlord _____

Name of Insurance Company and Agent _____

Other Current or Previous Accounts _____

5. Account Information

Estimated Monthly Co-op Purchases \$ _____ **Credit Limit Desired** \$ _____

PLEASE READ, DATE, and SIGN

I/We certify that the above information is true. **I/We certify that I am/we are entering into this credit agreement primarily for commercial purposes (that is, not personal, family, household purposes), or for corporate farming purposes.** I am /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 am/we are bound by the Co-op's Commercial/ Corporate Farm Credit Agreement and Statement of Disclosure and any amendments or replacements which the Co-op sends me. I/We have retained a copy of the Consumer/Non-Corporate Farm Credit Agreement and Statement of Disclosure. If the Co-op has service cards, I request a Co-op service card to be issued to me and to my 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. If this application is made by a corporation, each of the above statements is considered to be made by an authorized person on behalf of the corporation with all necessary grammatical changes.

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

Date: _____

Date: _____

Signing by Corporate Applicant

Signing by Corporate Co-Applicant

X _____
Corporate Applicant's Name

X _____
Corporate Co-Applicant's Name

X _____
Corporate Applicant's Signature

X _____
Corporate Co-Applicant's Signature

Title

Title

Office use only

Credit application approved? YES / NO

Credit limit approved: _____

Signature: _____

Name: _____

Date: _____



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Commercial Credit 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 (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

- i. 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.
- ii. The Card may be used to buy goods and services available on credit on these accounts from the Co-op.
- iii. The Card is the property of the Co-op. It is not transferable. You will immediately return all Cards if requested.
- iv. Upon cancellation or expiry, you will pay your accounts in full despite the cancellation or expiry of any rights and privileges under this agreement.
- v. 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.
- vi. 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

- i. 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 increase or decrease 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.
- ii. 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

- i. The Co-op will send you a statement every month for purchases that have been made under your account during the previous month and for any previous unpaid balance. Co-applicants and co-applicant cardholders will not receive statements.
- ii. 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.

- iii. 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.
 - iv. 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
- i. You agree to perform promptly all your obligations under this agreement.
 - ii. 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.
 - iii. You have the right to prepay the entire balance in full or in part without charge.
 - iv. You agree to pay interest to the Co-op on all past due amounts at the annual rate of **24 %** both before and after demand, default and judgment. 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.
 - v. 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.
 - vi. You agree you are liable for the entire outstanding balance of your accounts despite any variation of interest terms by the Co-op.
 - vii. 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 dishonoured.
 - viii. Payments must be made only by cash, cheque, debit card, credit card or money order, or by other arrangement authorized by the Co-op.

5. Default

- i. 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 dissolve the company;



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- 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.
 - ii. 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
 - iii. 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.
 - iv. You agree that taking of a judgement 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
- i. You may cancel this agreement at any time by written notice.
 - ii. The Co-op reserves the right to cancel your credit account at anytime without notice.
 - iii. If the credit account is inactive for more than 24 months, the Co-op may close the credit account without any notice.
 - iv. If the Co-op closes your credit account due to inactivity, you must submit a credit application to reopen the credit account.
7. Amendments
- i. 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 the applicable laws, after the date notice is given. Unless you cancel your credit accounts within the notice period, the amendment(s) will be binding on you.
8. Notices
- i. 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)
 - i. 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.
 - ii. 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
 - i. 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.
 - ii. 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.
 - iii. 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
 - i. 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.
 - ii. This agreement will be governed by the laws of the Province in which the Co-op is situated.
 - iii. 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.

<p>I have read the above Credit Agreement and Statement of Disclosure</p> <p>X _____</p> <p>Applicant/Authorized Signature</p>
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Account Pre-Authorized Payment

New enrollment Change in authorization Cancellation of authorization as of _____
Month/Day/Year

1. Cardholder Information (Please print clearly)

Name: _____
Mailing address: _____
City: _____ Province/State: _____ Postal code: _____
Telephone number: _____

2. Purchases Category (Check one)

Personal Purchases Business Purchases

3. Pre-Authorized Debit (PAD) Account Information

Co-op Member Number:
Located on your monthly billing statement to the right of "0646 0"
Note: Do not include any zeros preceding your account number
Example: 0646 0 123456 7

Deposit Account Number:
Transit number:

Financial Institution Number:
 Chequing account Savings account

Financial Institution: _____
Name _____
Address _____

In this authorization, "you" and "your" refer to each holder of the PAD account who signs this Form. Other terms have the meanings set out in the Pre-Authorized Debit Agreement. You authorize us to debit the PAD account for all amounts owed to us on the last day of the month (purchases made in one calendar month are payable in full by the last day of the following month). You have read, understand and agree to the the terms of the Pre-Authorized Debit Agreement which forms part of this Form.

Signature of account holder

Signature of joint account holder

Name (Please print)

Name (Please print)

Date (Month/Day/Year)

Date (Month/Day/Year)

IMPORTANT

You must include a "VOID" cheque for a Chequing Account or the top portion of your statement for a Savings Account. Your application cannot be processed without it.

If Joint Account, all authorized signatures are required.

When the form is complete, mail, email or fax to: **Dawson Co-operative Union**
Attention: Accounts Receivable
110 - 10080 8th Street
Dawson Creek, British Columbia V1G 3P8
Fax: (250) 782-6017
eMail: ar@dawsonco-op.com

If you have any questions or need assistance completing this form, please call us at (250) 782-4858

Pre-Authorized Debit Agreement

1. In this Authorization "I", "we", "my", "our", "me", and "us" refers to the Customer(s) indicated on the "Account Pre-Authorized Payment" Form attached hereof. The Dawson Co-operative Union will be referred to as the Dawson Co-op going forward.
2. I/we authorize the Dawson Co-op, and the financial institution designated (or any other financial institution I/we may authorize at any time) to begin deductions as per my/our instructions for monthly regular recurring payments and/or one-time payments from time to time, for payment of all charges under my/our Dawson Co-op account(s). Regular monthly payments for the full amount of purchases / services rendered will be debited to my/our specific account on the last day of each month following the purchase date. The Dawson Co-op will provide ten (10) days written notice of the amount of each regular debit by way of my/our monthly statement. The Dawson Co-op will obtain my/our authorization for any other one-time or sporadic debits.
3. It is my/our responsibility to ensure that sufficient funds are available in the Deposit Account for any payment. The Dawson Co-op will reverse the payment to my/our Member Account if it is returned or dishonoured for any reason. I/We agree that the Dawson Co-op may debit the Deposit Account on the payment due date as set out in and described in my/our monthly statement. Dishonoured payments will be resubmitted five (5) business days following the first attempt. Failure to pay the account balance in full by the original due date will result in interest being charged as per the Credit Agreement.
4. This authority is to remain in effect until the Dawson Co-op has received written notification from me/us of its change or termination. This notification must be received at least ten (10) business days before the next debit is scheduled via postal mail, eMail, or facsimile. I/We may obtain a cancellation form, or more information on my/our right to cancel a PAD agreement at my/our financial institution or by visiting www.payments.ca.
5. The Dawson Co-op may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least ten (10) days prior written notice to me/us.
6. I/We have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our financial institution or visit www.payments.ca.
7. I/We consent to the collection of any personal information that may be contained on the Form and in the records held by the Dawson Co-op and to the disclosure of such personal information to the Deposit Institution and the financial institution at which the Dawson Co-op maintains the account to be credited in order to process payments and as necessary for the proper application of the Rules. The Dawson Co-op may provide me/us with communications about the services by eMail, or other electronic method. For example, the Dawson Co-op may send confirmation of enrolment, cancellation, suspension or changes to the services by eMail.
8. To the extent permitted by applicable law, the Dawson Co-op shall not be liable to me/us, or any third party of any incidental, indirect, consequential, special, punitive or exemplary damages of any kind whatsoever arising from or in connection with this Agreement including without limitation a pre-authorized payment or a debit from a Deposit Account (whether in contract, tort, strict liability, products liability, or otherwise), including without limitation, lost revenues, loss of profits or loss or interruption of business. This provision shall survive termination of this Agreement. I/we agree not to use these services for any illegal or abusive purpose or in any way which damages, interferes with or disrupts these services or any property of ours or a third party. I/we agree to immediately notify the Dawson Co-op of any use of these services that is illegal, unauthorized, fraudulent or prohibited by this Agreement. The Dawson Co-op has made no warranty of merchantability, fitness for a particular purpose or non-infringement regarding these services and the Dawson Co-op makes no warranty that these services will meet my/our requirements, be uninterrupted, timely or error free. Any use of these services is done at my/our own risk and I/we are solely responsible for any damages in the event that I/we are unable to make a payment, a payment is late, or the Dawson Co-op does not receive my/our payment.

My/Our signature(s) below verifies that I/we have read and agree to the Terms as set out in the Agreement above.

Signature of account holder

Signature of joint account holder

Name (Please print)

Name (Please print)

Date (Month/Day/Year)

Date (Month/Day/Year)



Account Pre-Authorized Payment

New enrollment Change in authorization Cancellation of authorization as of _____
Month / Day / Year

1. Cardholder Information *(Please print clearly)*

Name: _____

Mailing Address: _____

City: _____ Province / State: _____ Postal Code: _____

Telephone Number: _____

2. Purchases Category *(Check one)*

Personal Purchases Business Purchases

3. Pre-Authorized Credit (PAC) Account Information

Co-op Member Number: -

*Located on your monthly billing statement to the right of "0646 0"
Note: Do not include any zeros preceding your account number
Example: 0646 0 009999 7 Member number = 9999-7*

Credit Card Number:

Expiry Date:
MM / YY

CVV / CSC:

Credit Card Type: Visa Mastercard American Express

In this authorization, "you" and "your" refer to each holder of the PAC account who signs this Form. Other terms have the meanings set out in the Pre-Authorized Credit Agreement. You authorize us to charge the PAC account for all amounts owed to us on the last day of the month (purchases made in one calendar month are payable in full by the last day of the following month). You have read, understand and agree to the the terms of the Pre-Authorized Credit Agreement which forms part of this Form.

Signature of card holder

Date (Month / Day / Year)

Name *(Please print)*

When this form is complete, mail, email, or fax to:

**Dawson Co-operative Union
Attention: Accounts Receivable
110-10200 8th Street
Dawson Creek, BC V1G 3P8
Fax: 250-782-6017
Email: ar@dawsonco-op.com**

If you have any questions or need assistance completing this form, please call us at (250) 782-4858

Pre-Authorized Debit Agreement

1. In this Authorization "I", "we", "my", "our", "me", and "us" refers to the Customer(s) indicated on the "Account Pre-Authorized Payment" Form attached hereof. The Dawson Co-operative Union will be referred to as the Dawson Co-op going forward.
2. I/we authorize the Dawson Co-op to begin deductions as per my/our instructions for monthly regular recurring payments and/or one-time payments from time to time, for payment of all charges under my/our Dawson Co-op account(s). Regular monthly payments for the full amount of purchases / services rendered will be charged to my/our specific account on the last day of each month following the purchase date. The Dawson Co-op will provide ten (10) days written notice of the amount of each regular charge by way of my/our monthly statement. The Dawson Co-op will obtain my/our authorization for one-time or sporadic charges.
3. It is my/our responsibility to ensure that sufficient credit is available on the credit card for any payment. The Dawson Co-op will reverse the payment to my/our Member Account if it is declined or dishonoured for any reason. I/We agree that the Dawson Co-op may charge the credit card on the payment due date as set out in and described in my/our monthly statement. Dishonoured payments will be resubmitted five (5) business days following the first attempt. Failure to pay the account balance in full by the original due date will result in interest being charged as per the Credit Agreement.
4. This authority is to remain in effect until the Dawson Co-op has received written notification from me/us of its change or termination. This notification must be received at least ten (10) business days before the next debit is scheduled via postal mail, email, or facsimile. I/We may obtain a cancellation form from the Dawson Co-op administration department or by visiting www.payments.ca.
5. The Dawson Co-op may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least ten (10) days prior written notice to me/us.
6. I/We have certain recourse rights if any charge does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PAC that is not authorized or is not consistent with this PAC Agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our credit card provider or visit www.payments.ca.
7. I/We consent to the collection of any personal information that may be contained on the Form and in the records held by the Dawson Co-op and to the disclosure of such personal information to Moneris and the financial institution at which the Dawson Co-op maintains the account to be credited in order to process payments and as necessary for the proper application of the Rules. The Dawson Co-op may provide me/us with communications about the services by email, or other electronic method. For example, the Dawson Co-op may send confirmation of enrolment, cancellation, suspension or changes to the services by email.
8. To the extent permitted by applicable law, the Dawson Co-op shall not be liable to me/us or any third party of any incidental, indirect, consequential, special, punitive or exemplary damages of any kind whatsoever arising from or in connection with this Agreement including without limitation a pre-authorized payment or a debit from credit card account (whether in contract, tort, strict liability, products liability, or otherwise), including without limitation, lost revenues, loss of profits or loss or interruption of business. This provision shall survive termination of this Agreement. I/We agree not to use these services for any illegal or abusive purpose or in any way which damages, interferes with or disrupts these services or any property of ours or a third party. I/We agree to immediately notify the Dawson Co-op of any use of these services that is illegal, unauthorized, fraudulent or prohibited by this Agreement. The Dawson Co-op has made no warranty that these services will meet my/our requirements, be uninterrupted, timely or error free. Any use of these services is done at my/our own risk and I/we are solely responsible for any damages in the event that I/we are unable to make a payment, a payment is late, or the Dawson Co-op does not receive my/our payment.

My signature below verifies that I/we have read and agree to the Terms as set out in the Agreement above.

Signature of card holder

Date (Month / Day / Year)

Name (Please print)

Payment Options

Pre-Authorized Debit

The Co-op offers Pre-Authorized Debit as one of the various options for paying your Co-op statement. If you would like the convenience of having your Co-op statement paid on-time every month without having to worry about making a payment, this is a great option for you. The pre-authorized debit withdrawals are set up to occur on the last day of the month following the current statement. If you would like to set up your membership account for this, please contact the administration office to get a copy of the pre-authorized debit application by phone or email.

Pre-Authorized Credit

The Co-op offers the option to have your credit card charged on a recurring basis to pay your Co-op statement each month. Like the option for pre-authorized debit, the charges will be set up to occur on the last day of the month following the current statement. Please contact our administration office for details on how to sign up.

Email: ar@dawsonco-op.com Phone: 250.782.4858

Payment via EFT

If you pay your bills through online banking, the Dawson Co-operative Union is listed as a bill payee on many of the major banking institutions and on the local credit union, Lake View Credit Union. Please note that payments may take a day or two to show up on your account.

Chetwynd and Tumbler Ridge Lake View Credit Union

Members located in Chetwynd and Tumbler Ridge are able to make payments using a debit or credit card for their Co-op statement at their local Lake View Credit Union. Please refer to the applicable LVCU location for hours of operation.

In-Person Payments

Payments can be made in-person at our following locations:

- Administration Office
 - Monday – Friday, 9am – 5pm
 - 110-10200 8th Street, Dawson Creek
- Food Store
 - Monday – Friday, 8am – 8pm
 - Saturday – Sunday, 9am – 6pm
 - 10200 8th Street, Dawson Creek
- Gas Bar
 - Monday – Saturday, 6am – 9pm
 - Sunday, 8am – 8pm
 - 10200 8th Street, Dawson Creek
- Cardlock – Dawson Creek
 - Monday – Friday, 7am – 5pm
 - 801 Adams Road, Dawson Creek
- Home & Agro Centre
 - Monday – Friday, 7am – 6pm
 - Saturday, 8am – 5pm
 - Sunday, 9am – 4pm
 - 10020 Parkhill Drive, Dawson Creek

Mailed Cheques

Cheques can be mailed to our administration office here:

Dawson Co-operative Union
110-10200 8th Street
Dawson Creek, BC V1G 3P8