



## Staunton

Augusta Cooperative Farm Bureau, Inc.  
1205B Richmond Rd  
Staunton, VA 24401

### Application for Customer Number

1. \_\_\_\_\_  
Name as Shown on Account (please print)

2. \_\_\_\_\_  
Contact Name (please print)                      Email Address

3. \_\_\_\_\_  
Physical Address (please print)

4. \_\_\_\_\_  
Mailing Address (if different from physical address - please print)

5. \_\_\_\_\_  
City, State, Zip code (please print)                      Telephone

**Certification** – *Under the penalties of perjury, I certify that the information provided on this form is true, correct, and complete.*

\_\_\_\_\_  
**Signature**    **Date**

Please return completed form to the co-op's mailing address listed above. If you would like a charge account please attach a credit application with this form.