

540-338-0930

Fax: 540-338-2115



OFFICE:
115 East Main Street
Purcellville, Va 20132

FUELING FACILITY:
103 Hirst Road
Purcellville, VA 20132

BUSINESS CREDIT APPLICATION

Salesman _____ Date _____

Type of Business/Organization (check one)

 Single Proprietorship Partnership Corporation (State)

Amount of credit requested \$ _____

For monthly usage over \$5,000.00 please attach current year financial statement.

| | | | |
|---------------------------|------------------|----------------------|------------------|
| Firm Name | Fed ID # or SS # | Type of Business | Date Established |
| If Contractor - License # | Effective Date | Expiration Date | |
| Owner/Partner/Office | Title | Owner/Partner/Office | Title |
| Business Address | | Business Phone | |
| Delivery Address | | Telephone | |
| Billing Address | | Business Fax | |

CREDIT REFERENCES: Please provide accurate mailing address, telephone number and account numbers for the following:

REFERENCES: Open Accounts (Credit Accounts) IMPORTANT: FAX Number Must Be Included.

| | | | |
|------|---------|------------|-----------|
| Name | Address | FAX Number | Telephone |
| Name | Address | FAX Number | Telephone |
| Name | Address | FAX Number | Telephone |

BANK REFERENCES:

| | |
|---|---|
| Bank and Branch, Person to Contact | Bank and Branch, Person to Contact |
| Account Number <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan | Account Number <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan |

The above information is for the purpose of obtaining credit history and will be kept strictly confidential.

Has the applicant or any of its owners, principals, partners, officers or directors ever filed a voluntary petition in bankruptcy, been adjudged bankrupt, or made an assignment for the benefit of creditors? YES NO

Number of Vehicles: Diesel _____ Gasoline _____ Other _____

Accounts Payable Office: Name _____ Phone: _____ Fax: _____

CONTINUED:

115 EAST MAIN STREET • PURCELLVILLE, VIRGINIA 20132 • 540-338-0930 • FAX: 540-338-2115

CURRENT FUEL SUPPLIER

| | | | |
|--------------|-----------|-----|----------------|
| Company Name | Address | | |
| Contact | Telephone | Fax | Account Number |

CREDIT POLICY TERMS AND CREDIT AGREEMENT

NET: UPON RECEIPT OF INVOICE

1. A LATE CHARGE will be assessed on balances over 30 days. This is computed by a periodic rate of 1.5% (which is an annual percentage rate of 18%) on the portion of the previous balance over 30 days less payments and credits appearing on the statement. An account is considered PAST DUE when a LATE PAYMENT CHARGE is assessed. Any account which becomes past due may be subject to termination of services WITHOUT NOTICE until the balance is paid in full.
2. Any account which is turned over to a COLLECTION AGENCY or ATTORNEY will be charged with the cost of collection.
3. A service charge of \$20.00 will be applied when a check is returned by the bank.

I certify that the information contained in this document is true and accurate and is submitted to Commercial Fueling 24/7 in conjunction with a request for credit. References listed are authorized to release any credit information to Commercial Fueling 24/7. A copy of this authorization shall be as valid as the original.

Please Print Name and Title

Signature

Company Name

Date

PERSONAL GUARANTY

In consideration for the extension of charge card rights for the purchase of property or services to the applicant, THE UNDERSIGNED PERSONALLY GUARANTEES THE UNCONDITIONAL PAYMENT OF ANY UNPAID AMOUNT UPON APPLICANT'S ACCOUNT. This is a guarantee of payment and not merely of collection; no collection or civil action need be commenced against the Applicant prior to a demand being made upon the undersigned. A comply of this guarantee shall be as valid as the original.

Guarantor Signature

Date

Guarantor Signature

Date

Please Print Name and Title

Please Print Name and Title

CREDIT INVESTIGATION AUTHORIZATION

I hereby authorize Commercial Fueling 24/7 to make whatever credit investigations they may deem appropriate and to exchange any information they may receive in the course of such investigations. A comply of this authorization shall be as valid as the original.

Guarantor Signature

Date

Guarantor Signature

Date

Please Print Name and Title

Please Print Name and Title

