QUALITY
PETROLEUM
<b>PRODUCTS</b>

	FOR OFFICE USE ONLY
Date:	
elivering Plant:	
alesperson:	



## EngleField Oil Company

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CREDIT APP  Company Name (Legal Na				siness or DI			ube	inc		Corporate II			te in which	Incorporated	
Street Address (Physical Address)				City					State			Zip			
Street Address (Physical Address)				City						ľ	Zip				
Mailing Address (Billing Address)				City							Zip				
Phone Number	Fax Numb	Fax Number			E-Mail Address for Statement			nts and Invoices				Cell Phor	Cell Phone Number		
Previous Supplier Type of Business			Business	ness Year			Year Started Est. Monthly Purchas				Premise	s O Owned O Rented			
Exemptions (If exempt, please include Tax Exempt Form wi			Form with ap	vith application)				x Exempt? Federal Tax Exempt O No O Yes O No			rederal ID Number			O Rented	
PLEA	SE CHECK	THE MOS	ST PERT	INENT	CORP						<b>IPLE</b>	re belo	w		
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	PRINCIPA	L OFFIC	ER						A	DDRES	SS				
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2.															
3.															
<i>.</i>	$\Box_{\mathbf{P}}$	ARTNERS	SHIP / PI	ROPRI	ETORS	HIP (Lis	t Partne	rs) (If n	ore than 2	, list separ	ate shee	et)			
Name				ldress			City			-		State	Zip		
Social Security No.	Driver's License	e No. Phone Number C				Il Phone Number E-Mail Addre				SS					
Emergency Contact Person Address			3				City			Zip	]	Phone Number			
Name	Title	l	Physical Addr		lress				City			State	Zip		
Social Security No.	Driver's License	e No.	No. Phone Number			ll Phone Nun	-Mail Addres:	S							
Emergency Contact Person Address			S				City			Zip	]	Phone Number			
If Company	is Less Tha	an One Yo	ear Old o	r Chai	nge in	Owners	hip. l	Pleas	e Provid	le the F	ollow	ing Info	rmati	on	
			Address				• •	City				State	Zip		
Social Security No. Phone Number			Number	Driver's Li			icense No.			E-Mail Address					
Banking Refere	nces	l													
Bank: Address: Phone:				:	Account Officer:					Checking Account No (Required):					
Trade Reference				•							·				
1 Company Name:						2 Com	pany N	lame:							
Contact Name:					Contact Name:										
Phone:		Fax:				Phone: Fax:									
3 Company Name:		I				4 Company Name:									
Contact Name:					Contact Name:										
Phone: Fax:					Phone: Fax:										

SIGNATURE REQUIRED ON OPPOSITE SIDE.

See reverse side for Terms & Conditions.  $\mbox{\it V}$ 

PHONE (740) 928-8215

FAX (740) 527-2873

www.englefieldoil.com

## **CREDIT AGREEMENT**

In consideration of your extending credit to me, I (The Customer) agree to the following regarding all purchases made with Englefield (The Company) by me or others authorized to use my account.

- 1. **BALANCE:** To pay balance of my account within terms upon receipt of my statement without incurring a finance charge/ interest.
- 2. **FINANCE CHARGE:** To pay a non-negotiable finance charge/ interest of 1-1/2% per month (18% annually) on all past due amounts. The balance outstanding at statement time is determined by adding purchases and other charges to, and subtracting payments and credits from the balance outstanding on the previous statement.
- 3. **FAILURE TO PAY:** Englefield Oil may declare the full remaining unpaid balance immediately payable if I fail to make any required payment in full when due. If the account is referred to an attorney for collection, all cost of collection incurred by Englefield Oil Company, including but not limited to, Attorney's fee, small claim fees, collection agent fees, and expenses, not exceeding the amount permitted by state law. Ohio law applied during disputes. All court cases will be held in Licking County Courts.
- 4. **CREDIT LIMITS:** Based on the information I supplied and a subsequent credit inquiry, my newly approved account is subject to credit limits. Credit limits are adjusted as needed based on my payment history, Englefield Oil Company reserves the right to limit the extent of my purchases.
- 5. **CREDIT INQUIRY:** You (The Company) are authorized to investigate my credit history including bank and trade references both now and for future updates. You (The Company) are also authorized to report to proper persons and bureaus my performance under this agreement.
- 6. **REVISION AND TERMINATION OF AGREEMENT:** You, (The Company) may revise this agreement at any time upon giving me proper notice. Either you, (The Company) or I (The Customer) may terminate this agreement upon giving proper written notice to the other. However, such termination shall not effect my then-existing obligations under this agreement.
- 7. **TERMS OF SALE:** Will be determined by credit inquiry: Your billing cycle will either be weekly, semi monthly or monthly as determined by your credit history and financial information.

## \*\*\*PLEASE FILL OUT AND RETURN WITH THIS APPLICATION, A CERTIFICATE OF TAX EXEMPTION, OR YOU WILL BE CHARGED TAX\*\*\*

The undersigned individual, who is either a principal of the credit applicant or a sole proprietor of the credit applicant, recognizes that his or her individual credit history may be a factor in the evaluation or the credit history of the applicant, hereby consents to and authorizes the use of a consumer credit report on the undersigned by title the named business credit grantor, from time to time as may be needed, in the credit evaluation process.

I hereby certify that the information contained herein is complete and accurate. This information has been furnished with the understanding that it is to be used to determine the amount and conditions of the credit to be extended. Furthermore, I hereby authorize the financial institutions listed in this credit application to release necessary information to the company for which credit is being applied for in order to verify the information contained herein.

If Company is a Corporation or Partnership

r	
	(Name & Title of Officer or partner)
PRINT NAME	
CICNATUDE (A.d. wind Cinnature)	DATE
SIGNATURE (Authorizea Signature)	DATE
COMPANY NAME	