



Business Credit Application

Legal Business Name:	DBA:
Physical Address:	
Mailing Address:	
Federal Tax ID/EIN:	Exempt Y/N: (If Yes, provide exemption cert.)

Company Information

Type of Business:	In Business Since:
Legal Form Under Which Business Operates:	Corp <input type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/>
If Division/Subsidiary, Name of Parent Company:	In Business Since:
Name of Company Principal Responsible for Business Transactions:	Title:
Street Address:	City/State/Zip: Email: Phone:
Name of Individual to Contact Regarding Payment:	Title:
Phone#:	Email:

References

Bank Institution Name:	Contact Person:	
Account #:	Email:	
Phone:	Fax:	
Address:		
Company Name:	Company Name:	Company Name:
Contact Name:	Contact Name:	Contact Name:
City/State:	City/State:	City/State:
Phone:	Phone:	Phone:

Operations/ Purchase Information

Operations Contact:	Phone:	Fax:	Email:
Purchasing Contact:	Phone:	Fax:	Email: Phone:
Purchase Order Number Required: (Y/N)	Other Info Needed on Invoice:		
Special Request for Lubes and Other Products:			
Projected Monthly Volume	Fuel:	Lubes:	Other:
Credit Limit Requested:			

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.

Signature

Date