

PREMIER PETROLEUM

CUSTOMER APPLICATION

All information should be completed by the customer before account can be approved.

Customer Billing Information

Legal Name: _____ Date: _____

Contact Name: _____ EIN Number: _____
OR Social Security Number _____ - _____ - _____

Telephone Number: _____ - _____ - _____ Fax Number: _____ - _____ - _____ Email: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Delivery Site Information

Delivery Site Address (if different from billing address): _____

City: _____ State: _____ Zip Code: _____

Key / Site Contact Name: _____

Telephone Number: _____ - _____ - _____ Fax Number: _____ - _____ - _____ Email: _____

Credit Information

The following information is necessary to process the application. It will be held confidential.

☐ Corporation ☐ Partnership ☐ Proprietorship ☐ LLC Type of Industry _____

Purchase Order Required? ☐ Yes ☐ No

Filed Bankruptcy in the last 7 years ☐ Yes ☐ No

If Yes, Company name and year of filing: _____

FINANCIAL:

Bank: _____ Bank Officer: _____

Bank Address: _____ Telephone Number: _____ - _____ - _____

REFERENCES:

1. Business Name: _____ Telephone Number: _____ - _____ - _____

Address: _____ Fax Number: _____ - _____ - _____

City: _____ State: _____ Zip: _____ Contact: _____

2. Business Name: _____ Telephone Number: _____ - _____ - _____

Address: _____ Fax Number: _____ - _____ - _____

City: _____ State: _____ Zip: _____ Contact: _____

3. Business Name: _____ Telephone Number: _____ - _____ - _____

Address: _____ Fax Number: _____ - _____ - _____

City: _____ State: _____ Zip: _____ Contact: _____

Business Ownership Information

Time in business under present ownership: _____ years

1. Name of Principal(s) _____ Telephone Number: _____ - _____ - _____

Address _____ Social Security Number _____

City: _____ State: _____ Zip Code: _____

2. Name of Principal(s) _____ Telephone Number: _____ - _____ - _____

Address _____ Social Security Number _____

City: _____ State: _____ Zip Code: _____

I certify that all the information on this form is correct. I fully understand your credit terms and agree to the proper payment in consideration of extended credit. I authorize Premier Petroleum to check my bank and credit references as listed above. Premier Petroleum reserves the right to revoke credit, demand payment in full, and/or reduce the credit line amount. If reasonable collection or legal action is deemed necessary by Premier Petroleum to receive monies owed, the collection or legal fees shall also be charged to, and paid by the above person, business, or organization.

Signature of Owner or Officer: _____ Title: _____

Date: _____

I, the undersigned do personally guarantee payment to Premier Petroleum for previous, present, and future charges to the above business or corporation, hereinafter called the Customer, which shall include orders placed by an officer, employee or agent of the Customer. I also agree to pay all costs of collection, including reasonable attorney's fees in the event of default of payment by the Customer of the Guarantor. This guarantee shall remain in effect until revoked by the Guarantor by written notification to Premier Petroleum by registered mail, or certified mail, return receipt requested. In the event the business is sold, Premier Petroleum must be notified in writing by registered mail, before Guaranty is revoked. The application and guaranty are subject to approval by the credit department of Premier Petroleum. Confirmation of approval to the Customer or Guarantor is not required.

Guarantor Signature _____ Guarantor Name: _____

Guarantor Title _____ Date: _____