



**Marketing
Commercial
Confidential
Credit Application**

Date _____

NAME OF CORPORATION INDIVIDUAL PARTNERSHIP			BUSINESS PHONE	
BILLING ADDRESS		CITY	STATE	ZIP
DELIVERY ADDRESS (If Different)		CITY	STATE	ZIP
PERSON TO CONTACT & TITLE		DRIVER'S LICENSE NUMBER	YEARS IN BUSINESS UNDER PRESENT OWNERSHIP	
Principal Owners	NAME (First) MIDDLE INITIAL LAST TITLE	SOC. SEC. NUMBER		
	HOME ADDRESS		DATE OF BIRTH	
	NAME (First) MIDDLE INITIAL LAST TITLE	SOC. SEC. NUMBER		
	HOME ADDRESS		DATE OF BIRTH	
Bank	NAME OF BANK	OFFICER TO CONTACT	PHONE	
	ADDRESS OF BRANCH		CHECKING ACCT. NUMBER	
Exemption Numbers	FED. I.D. NUMBER	STATE I.D. NUMBER	STATE SALES TAX EXEMPTION NUMBER	
	TRANSPORTER	ESTIMATED MONTHLY GALLONS		CREDIT LIMIT REQUESTED
Trade References	NAME	PERSON TO CONTACT	PHONE	
	ADDRESS		FAX	
	NAME	PERSON TO CONTACT	PHONE	
	ADDRESS		FAX	
	NAME	PERSON TO CONTACT	PHONE	
	ADDRESS		FAX	
	NAME	PERSON TO CONTACT	PHONE	
	ADDRESS		FAX	
<p>Accounts must be kept current. Terms Net 30 days from date of delivery with approved credit. Buyer agrees to pay all bills for product sold by seller according to the terms thereof and upon failure to do so, may cause credit to be suspended and a finance charge of 1.5% per month (18% annually), and to pay all costs and fees of collection.</p> <p>Notify us immediately of any change in ownership or address.</p> <p>The undersigned hereby represent that all of the information on the credit application is true and that said representations are made for the purpose of obtaining credit from Garrow Oil Marketing, Inc. The undersigned hereby agrees to all of the above terms and conditions.</p> <p>I acknowledge that my signature hereon authorizes the above named financial institutions to furnish credit information to Garrow Oil Marketing, Inc.</p> <p style="text-align: center;">BUSINESS NAME _____</p> <p>APPLICANT'S SIGNATURE & TITLE _____</p>				