



## Part I Business Accounts

<b>Complete Business Name</b>		<b>Phone Number</b>	
<b>Mailing Address</b>		<b>City</b>	<b>State</b> <b>ZIP</b>
<b>Street Address</b> <small>(if Different than above)</small>		<b>City</b>	<b>State</b> <b>ZIP</b>
<b>Type of Business</b>	<b>Years Established</b>	<b>Years at Present Location</b>	<b>Estimated Monthly Purchases \$</b>
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation		<b>Credit Limit Requested \$</b>	
<b>Federal I.D. Number</b>		<b>Business License Number</b>	
<b>Contractor's License Number</b>		<b>Fax Number</b>	
<b>Are Items for Resale</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Resale Certificate Number:</b>		

<b>Has the Firm or any of it's principles ever filed for bankruptcy?</b>
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## Part II Owner(s) or Partner(s) Name(s) Attach additional sheet if necessary

<b>1) Name and Title</b>	<b>Percent Owned</b>
<b>Drivers License Number</b>	<b>Social Security Number</b>
<b>Residential Addresses for past five (5) years</b>	
<b>Business Addresses for past five (5) years</b>	
<b>Fictitious Business Name(s) used previously</b>	

<b>2) Name and Title</b>	<b>Percent Owned</b>
<b>Drivers License Number</b>	<b>Social Security Number</b>
<b>Residential Addresses for past five (5) years</b>	
<b>Business Addresses for past five (5) years</b>	
<b>Fictitious Business Name(s) used previously</b>	

<b>3) Name and Title</b>	<b>Percent Owned</b>
<b>Drivers License Number</b>	<b>Social Security Number</b>
<b>Residential Addresses for past five (5) years</b>	
<b>Business Addresses for past five (5) years</b>	
<b>Fictitious Business Name(s) used previously</b>	

**Part III Individual Accounts**

Name <input style="width:90%;" type="text"/>		Age <input style="width:10%;" type="text"/>	Drivers License Number <input style="width:90%;" type="text"/>		Social Security Number <input style="width:90%;" type="text"/>
Street Address <input style="width:90%;" type="text"/>		City <input style="width:30%;" type="text"/>	State <input style="width:15%;" type="text"/>	Zip <input style="width:15%;" type="text"/>	Home Phone <input style="width:30%;" type="text"/>
<input type="checkbox"/> Mobile Home	<input type="checkbox"/> Own	Years at Address <input style="width:10%;" type="text"/>	Previous address If less than 3 years please list previous residence		
<input type="checkbox"/> House	<input type="checkbox"/> Buying				
<input type="checkbox"/> Apartment	<input type="checkbox"/> Rent	Street Address <input style="width:40%;" type="text"/>	City <input style="width:15%;" type="text"/>	State <input style="width:10%;" type="text"/>	Zip <input style="width:10%;" type="text"/>
Employer's Name <input style="width:90%;" type="text"/>		Occupation <input style="width:90%;" type="text"/>		Monthly Income <input style="width:20%;" type="text"/>	
Spouse Name <input style="width:90%;" type="text"/>		Drivers License Number <input style="width:90%;" type="text"/>		Social Security Number <input style="width:90%;" type="text"/>	
Spouse Employer's Name <input style="width:90%;" type="text"/>		Occupation <input style="width:90%;" type="text"/>		Monthly Income <input style="width:20%;" type="text"/>	
Has the applicant or spouse filed for Bankruptcy <input style="width:30%;" type="text"/>			Check here if you want your spouse to be considered for credit individually <input type="checkbox"/>		

**Part IV \* PLEASE ATTACH CURRENT FINANCIAL STATEMENTS- FAILURE TO PROVIDE THIS MAY RESULT IN A DELAY IN PROCESSING.**

**Part V Major Credit References (Give only those you buy from an open account)**

Company Name <input style="width:90%;" type="text"/>		Person to Contact <input style="width:90%;" type="text"/>		Phone <input style="width:30%;" type="text"/>	
Street Address <input style="width:90%;" type="text"/>		City <input style="width:30%;" type="text"/>	State <input style="width:15%;" type="text"/>	Zip <input style="width:15%;" type="text"/>	
Company Name <input style="width:90%;" type="text"/>		Person to Contact <input style="width:90%;" type="text"/>		Phone <input style="width:30%;" type="text"/>	
Company Name <input style="width:90%;" type="text"/>		Person to Contact <input style="width:90%;" type="text"/>		Phone <input style="width:30%;" type="text"/>	
Current Fuel Supplier					
Company Name <input style="width:90%;" type="text"/>		Person to Contact <input style="width:90%;" type="text"/>		Phone <input style="width:30%;" type="text"/>	
Street Address <input style="width:90%;" type="text"/>		City <input style="width:30%;" type="text"/>	State <input style="width:15%;" type="text"/>	Zip <input style="width:15%;" type="text"/>	

**Part VI Bank Reference Note: Attach copy of deposit slip to confirm account Name and Location and Account #**

Bank Name <input style="width:90%;" type="text"/>		Person to Contact <input style="width:90%;" type="text"/>		Phone <input style="width:30%;" type="text"/>	
Street Address <input style="width:90%;" type="text"/>		City <input style="width:30%;" type="text"/>	State <input style="width:15%;" type="text"/>	Zip <input style="width:15%;" type="text"/>	Phone Number <input style="width:30%;" type="text"/>
Type of Relationship: <input type="checkbox"/> Checking Account # <input style="width:30%;" type="text"/> <input type="checkbox"/> Savings Account # <input style="width:30%;" type="text"/> <input type="checkbox"/> Loan # <input style="width:30%;" type="text"/>					

**AUTHORIZATION FOR RELEASE OF CREDIT INFORMATION**

The undersigned applicant ("Applicant") has made application to Silvas Oil Company. ("Silvas Oil") for a commercial, and/or individual credit line, and hereby authorize:

- 1) Silvas oil to obtain from any credit reporting agency to run any credit report relating to the undersigned which Silvas oil may deem necessary for evaluating the credit line requested by the undersigned.
- 2) Any bank or other lender or grantor of credit to provide Silvas Oil copy of the Applicant's most recent financial statement in its possession and information regarding the character, reputation, financial responsibility and indebtedness of the Applicant as requested by the Silvas Oil for the purpose of evaluating the commercial and or individual credit request of the applicant.
- 3) Any guarantor who executes this Credit Application hereby authorizes Silvas Oil to obtain all such information, and authorizes any bank, lender or other grantor for credit to release such information, regarding such guarantor.
- 4) This Authorization shall continue to be valid during any such time period that credit is extended by Silvas Oil in order that Silvas Oil may protect its financial interests. The applicant, and such guarantor, hereby releases Silvas Oil, or other lender or grantor of credit from any and all claims or causes action that may arise or which he/she might have reason of information furnished Silvas Oil by a credit reporting agency or by a bank or other lender or grantor of credit.

Printed Name  Applicant's Signature: \_\_\_\_\_

Printed Name  Applicant's Signature: \_\_\_\_\_

## Part VII Credit Terms and Credit Agreement

The undersigned agrees to pay for all fuel, lubricants, and other products within terms set forth on the invoice. The undersigned further agrees to pay an handling charge of \$20.00 or each returned check and all collection and legal fees.

**ALL ACCOUNTS WHICH ARE NOT PAID IN FULL BY THE STATED DUE DATE SHALL BE ASSESSED A CHAGES OF 1 ½ PER MONTH (18% ANNUAL RATE) ON THE UNPAID BALANCE OF THE ACCOUNT.**

Any action brought to enforce or interpret the provisions of this credit application, or to seek collection on any monies due and owing from applicant to Silvas Oil Company, may be brought in a court of competent jurisdiction in the County of Fresno, State of California, and the undersigned waives the right to bring or have such action brought in any other Court. The undersigned agrees that in the event of any dispute arising under or in connection herewith that the prevailing shall be entitled to be reimbursed for all costs, fees, and expenses incurred in connection with prosecuted or defending such claim, including reasonable attorney's fees and costs.

Undersigned agrees to indemnify and hold Silvas Oil Harmless from all claims, actions, cause of action, demands, obligations, liabilities, losses, costs, and expenses, in connection with, on account of, or in any way relating to or arising from the above-referenced account, or any sales of goods or services to the undersigned.

Printed Name  Applicant's Signature: \_\_\_\_\_

Company  Date:

### Personal Guarantee

In consideration for the extension of credit 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.

This is a continuing guarantee, and the obligations, of the undersigned are unlimited, absolute, and unconditional. This continuing guarantee shall continue in effect until all the obligations owing on the above account Silvas Oil Company ("Silvas Oil") have been paid in full. This continuing guarantee shall not be affected or impaired by any modifications, supplements, extensions or amendments to any contract or agreement to which the parties thereto may hereafter agree.

Guarantor agrees to indemnify and hold Silvas Oil harmless from and against all claims, actions, cause of action, demands, obligations, liabilities, losses, costs, and expenses in connection with on account of, or in any way relating to or arising from the above-referenced account, or any sales of goods or services to the undersigned. The undersigned agrees that in the event of any dispute arising under or in connection herewith that the prevailing party shall be entitled to be reimbursed for all costs, fees, and expenses incurred in connection with prosecuting or defending such claim, including reasonable attorneys' fees and costs.

Guarantor waives all rights and defenses as guarantor, including without limitation, those which may be waived pursuant to California Civil Coded Section 2856, and specifically including, without limitation, those arising out of an election of remedies by Silvas Oil and waives any rights to require Silvas Oil proceed against the above referenced account, proceed against or exhaust any security held by Silvas Oil on the account, or pursue any other remedy in the power of Silvas Oil whatsoever. Guarantor waives any defense arising by reason of disability or any other defense which the account debtor may have, or by reason of the cessation, from any cause whatsoever for the liability on the above referenced account.

The death of the guarantor shall not terminate this continuing guarantee. This continuing guarantee shall be binding upon the heirs, executors, administrators, trustees, beneficiaries, successors, and assigns the guarantor and shall insure to the benefit of Silvas Oil, its successors and assigns.

The validity of this continuing agreement, its construction interpretation, and enforcement and the rights of the rights of the parties hereto shall be determined under governed by and construed in accordance with the laws of the State of California.

Any action under this guarantee may be brought in a court of competent jurisdiction on the County of Fresno, State of California, and the undersigned waives the right to bring of have any action brought in any other court.

Printed Name  Applicant's Signature: \_\_\_\_\_

Drivers License#  Social Security #  Date

**Account Information**

<b>Business Name</b>	<input type="text"/>	<b>Phone #</b>	<input type="text"/>
<b>Address</b>	<input type="text"/>	<b>Fax #</b>	<input type="text"/>
<b>Delivery Address</b>	<input type="text"/>	<b>Email</b>	<input type="text"/>
	<input type="text"/>	<b>Hours of Operation</b>	<input type="text"/>
<b>Person to Contact</b>	<input type="text"/>		
<b>Cardlock Contact</b>	<input type="text"/>		
<b>Person to Contact</b>	<input type="text"/>		
<b>Cardlock Contact</b>	<input type="text"/>		
<b>Special Delivery Instructions</b>	<input type="text"/>		

**For Office Use Only**

**Salesman**  **Code #**  **Date**

**Loaned Equipment**

Is product for resale?  Yes  No      Is resale certificate signed?  Yes  No      Is worksheet signed?  Yes  No

Will account be C.O.D.  Yes  No      If No, is credit application is signed and dated  Yes  No

Would you like 24 hour fueling card,  Yes  No      If so, please attach card request form, cardlock agreement and update form (CFN)

Will account require a PO#?  Yes  No      Will it be a blanket PO?  Yes  No

Will Warehouse be handling deliveries?  Yes  No

Do we need to add product to inventory?  Yes  No      Products to be added?

**Approved By:**

<b>Marketing Manager</b>	<input type="text"/>	<b>Date</b>	<input type="text"/>
<b>Credit Manager</b>	<input type="text"/>	<b>Date</b>	<input type="text"/>
<b>Controller</b>	<input type="text"/>	<b>Date</b>	<input type="text"/>
<b>Credit Limit</b>	<input type="text"/>	<b>Terms</b>	<input type="text"/>
<b>Account # Assigned</b>	<input type="text"/>		
<b>Salesmen Notified</b>	<input type="text"/>	<b>Date</b>	<input type="text"/>
<b>Date Submitted</b>	<input type="text"/>	<b>Date Approved</b>	<input type="text"/>

