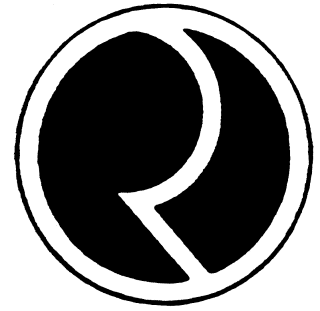




P.O. Box 315 • Wabash, IN 46992  
 Phone: (260)563-3317  
 Fax: (260)563-4692  
 Email: info@jmroil.com



**Individual Credit Application Form**

Reason for Application: Cardlock \_\_\_\_\_ LP \_\_\_\_\_ Home Heat \_\_\_\_\_ Lubricants \_\_\_\_\_ Fuel Del \_\_\_\_\_  
 (If cardlock write desired # of cards)

Name \_\_\_\_\_ Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Spouse \_\_\_\_\_ Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Delivery Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_

Sales Tax Exempt # \_\_\_\_\_

Invoice/Statement Delivery Preference: Mail \_\_\_\_\_ E-Mail \_\_\_\_\_ Fax \_\_\_\_\_

Corresponding E-Mail or Fax Number \_\_\_\_\_

Bank Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Credit References:**

1. Name \_\_\_\_\_

2. Name \_\_\_\_\_

3. Name \_\_\_\_\_

**Employment Information (Primary Name):**

Employed By \_\_\_\_\_ How Long \_\_\_\_\_ Occupation \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

**Employment Information (Secondary Name):**

Employed By \_\_\_\_\_ How Long \_\_\_\_\_ Occupation \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

# CREDIT AGREEMENT

This agreement is for ( ) Gasoline, ( ) Fuel Oil, ( ) Lubricants, ( ) Coolants, ( ) Other. Deliveries to made on a(n) ( ) Automatic, ( ) will call basis. Automatic Fuel Oil Deliveries will be made based on seasonal degree-days, calendar cycles for other products provided that there is no balance due at that time, and current budget accounts excluded. Deliveries to be made on a will call basis should be called in no later than 24 hours in advance of the desired delivery time.

It is also agreed that if payment is not received when due and if it is placed with an attorney, certified collection agency, or other avenue of collection, for collection that the undersigned guarantor(s) agrees to pay to you all costs of collection, including a sum equivalent to 1/3 of the amount referred to such collection agency or attorney, which the undersigned guarantor(s) agrees to be just and reasonable, or any court having jurisdiction shall determine to be just and reasonable, which shall be immediately be added to the amount due. This guarantee may not be waived orally and shall continue in full force and effect until such a time when you shall receive from the undersigned written revocation and such revocation shall not in any way relieve the undersigned from liability for indebtedness incurred prior to the actual receipt by you at your office of such notice. Said notice should be sent certified with return receipt and the signed registry return receipt card shall be the best evidence thereof.

It is also understood that for value received and the further consideration of any credit that you may extend to the premises mentioned in the agreement, the undersigned does (do) hereby guarantee the full prompt payment to you of all indebtedness which the said person or corporation has hereto incurred or does hereafter incur for the purchase of merchandise and or labor charges from J.M. Reynolds Oil Co., Inc. or it authorized agent or representative.

ALL ACCOUNTS WITH A BALANCE OVER THIRTY DAYS  
WILL BE ASSESSED A SERVICE CHARGE EQUAL TO  
1.5% PER MONTH, ANNUAL RATE OF 18% A.P.R.

I (We) hereby certify that I (we) have read the form in its entirety and accepts its conditions, and further state that all information supplied by me is true in fact and intent.

## INDIVIDUAL SIGNS HERE

Applicant \_\_\_\_\_

Spouse \_\_\_\_\_

This above agreement accepted this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By \_\_\_\_\_ (Name & Title)