

2300 Booth Street Monroe, LA 71201

Office: 318-388-2602 | Toll-Free: 1-800-883-8081 | Fax: 318-323-1154

Account I	Manager:			
New Acco	ount #:			
Approved	d:	YES:	NO:	
Terms:				
EFT:	ACH:		Credit Card:	

Fax or E-mail credit app to cgolzales@central-oil.com

\*FOR OFFICIAL USE ONLY

## **Credit Application**

Company Information										
Company Name:					_					
Billing Address:				_		#:				
Shipping Address:				_	Website:_					
Shipping Address					Email:					
					Is this	company			Corporation	
Company Phone:		Fax:				Partnership Sole Propri				
If incorporated, in what s	state?					Limited Lia		oany		
Type of business?						 Contractor				
How long has the compo	any beer	n in busine	ss?							
Do you require a purcha	ise order	number?	YES or NO							
Amount of credit desired	12 \$200	\$500	\$1,000	\$2,000	3,000	5,000	\$10,000_	\$15,000	\$20,000+	
Do you have other busine									\$20,0001	
Do you have office busine	ess Harrie	23 YOU ITIQ	у паче орг	erarea C	13: 11 30, ple	ase complete	THE TOHOW	ng.		
EFT/ACH payments are th	ne he dro	afted from	r Rank Na	me.		^	ccount #·			
Account Name:	ie be ult	aned non	i. Darik INGI		ting #:	A				
Personal Credit Informati	ion			KOU	y π					
Please complete informa		all owners	and parts	orc						
rieuse compiete informa		ali Owners	ana pann	C13.						
Name		S	ocial Secu	rity Num	ber			Spous	Se	
Address		C	City & State	)				Zip C	ode	
Name		S	ocial Secu	rity Num	ber			Spous	se	
Address			City & State	;				Zip Co	ode	
Taxing Information (Must	he com	oleted)								
State Tax Exempt: YES	NO NO		ou must at	tach vo	ır hlanket a	certificate(s) o	f exemptio	n notice hef	ore we can bill	
Parish/City Exempt: YES	NO		hout taxes		or pialikel (	on inicate (a) O	CACITIPITO	II HOHEE DER	510 AC COLL DIII	
Excise Tax Exempt: YES		•			- INICIDE :	OUTCIDE - f."	a alle i llianti d	2 /Dlag:'	la anal	
LACISE TUX EXEMPLE TES	NO	"WIII YO	our aelivery	point b	e inside or	OUTSIDE of the	e city limits	r (Please circ	ie onej	
State of			%			unty Name_			%	
City/Town Name			%_		Tota	al tax to chai	ge:			
Bank Reference										
Applicant's Principal Ban	·				_	Name of Loai	n Officer			
лирисант з тппстрагвант	N.					Traine Of LOGI	1 OIIICEI			
Address										

City & State		Telephone #	
on, a dialo			
Applicant's Insurance Company		Name of Agent	
Address	City & State	Teleph	none #
	S, & S	.000	
Credit Reference			
Please provide the names and phone	, ,	·	
limited times please provide us with re			,
<u>Name</u>	<u>City &amp; State</u>	Telephone #	Fax #
obligated for any credit requested to the Creditor part of this application, it submit financial stateme truthful, Credit extended Applicant. Credit extended Applicant. Credit extended at the total extended and the total extended and the transfer (EFT). Upon Credit execute any and all doc the hands of an attorney percent (25%) additional and all collection expensions. This information is being a through any credit bured stated terms and agree in the transfer terms are transfer to the transfer terms and agree in the transfer terms are transfer to the transfer terms and the transfer terms are transfer to the transfer terms are transfer to the transfer terms are transfer to the transfer terms and the transfer terms are transfer to the transfer term	advanced hereto until notice or at 2300 Booth Street, Monro t will be attached hereto and nts as requested by Creditor, by Creditor to Applicant on teled by Creditor to Applicant of cant agrees to pay the amount of the desired with the street of the third that is not paid by the dutal that the existence of the FIN, and the election of Creditor, ditor's request, Applicant will suments required for the payny of or collection, Applicant agril on the aggregate amount of ses incurred. Any refrences to provided for the purpose of o tee the Creditor to investigate au or by any other means included the pay in accordance with the ISS AGREEMENT UNTIL YOU HAN ISS AGREEMENT UNT	I made a part hereof and relied o and that such financial statement fuel accounts shall be due within two lubricant accounts shall be due into lubricant accounts shall be due and a late charge will be strong to the due and a late charge will be strong to the due and a late charge will be strong to the due and a late charge will be strong to the due and a late charge will be strong to the due and a late charge will be strong to the due and a late charge will be strong to the due and a late charge will be strong to the due t	via certified mail return receipt to presents a financial statement as a non accordingly. Applicant agrees to the swill be accurate, complete, and sen (10) days of billing date to within thirty (30) days of the billing to avoid a LATE CHARGE. All se added to the past due balance. A gramount shall be charged on any due from Creditor. It is expressly epilicant's obligation to pay the it payments via electronic funds processing transactions via EFT and acid in full when due and it is placed in fees in the amount of twenty-five acce charges, all court cost incurred, by guarantors.
P			
By: Signature		Title	Date
		Guaranty	
FOR VALUE RECEIVED, the undersigned SOLIDO for the faithful execution of al		ontract and is bound with Applica	• •
· · · · · · · · · · · · · · · · · · ·	I the obligations to be perform	ontract and is bound with Applicant, med on the part of the Applicant,	does hereby