Great Lakes Petroleum (Cleveland) FAX Completed Form to (216) 514-3275 CREDIT APPLICATION

(Version 03-01-13)

APPLICANT	T INFORMAT	ION (TO BE COMPLETED BY	APPLICANT)				
Company Name:							
Fed Tax ID #:		SSN #:	DUNS #:				
Phone #:		FAX #:	UST Permit #:				
Invoice Address:							
City:	State & ZIP Code:						
Customer Contact Name:							
E-Mail Invoices To:							
E-Mail Statements To:							
Delivery Address (Required) :							
City:		County:	State & ZIP Code:				
OF THE SPECIFIC REASONS FOR TI THE DAY YOU ARE NOTIFIED OF OL WITHIN 30 DAYS OF RECEIVING YO CREDITORS FROM DISCRIMINATING SEX, MARITAL STATUS, AGE (PROV PART OF THE APPLICANT'S INCOME GOOD FAITH EXERCISED ANY RIGH	HE DENIAL. TO JR DECISION. V UR REQUEST I G AGAINST CRI IDED APPLICA E IS DERIVED I IT UNDER THE	R PERSONAL CREDIT IS DENIED, YOU HAVE OBTAIN A COPY OF THE STATEMENT, PLEA WE WIL SEND YOU A WRITTEN STATEMENT (FOR THE STATEMENT OF THE STATEMENT OF THE BASIS OF RACE, ON THAS THE CAPACITY TO ENTER INTO A BITTON A BITT	SE CONTACT US WITHIN 60 DAYS FROM DIF THE REASONS FOR THE DENIAL OPPORTUNITY ACT PROHIBITS COLOR, RELIGION, NATIONAL ORIGIN, NDING CONTRACT), BECAUSE ALL OR OR BECAUSE THE APPLICANT HAS IN FEDERAL AGENCY THAT ADMINISTERS				
Bank Name:							
Bank Address:			Phone:				
City:	State & ZI	P Code:	FAX Phone:				
Credit Reference Name:							
Credit Reference Address:			Phone:				
City:	State & ZIP Code:		FAX Phone:				
Credit Reference Name:							
Credit Reference Address:	Phone:						
City:		State & ZIP Code:	FAX Phone:				
Name of Person Responsible	for Account	(Required):					
UNDERSTAND TERMS FOR PAYME ACCOUNTS NOT PAID WITHIN TE ANNUM) SUBJECT TO CHANGE W APPLICANT AGREES TO PAY THE CHARGES, LEGAL EXPENSES, AND CONDITIONS OF SALE. THE UND	INT ARE NET IRMS ARE PAS ITHOUT NOTI COSTS AND E D ATTORNEY F DERSIGNED UI	ONTACT THE ABOVE BANKS AND TRADE F 30 DAYS, UNLESS OTHERWISE SPECIFIED IT DUE AND ARE SUBJECT TO A 1.5% PER CE. ALL DELINQUENT ACCOUNTS MAY B EXPENSES OF COLLECTION OF ANY AMOU EES. AUTHORIZED SIGNER AGREES TO SCONDITIONALY GUARANTEES THE FULL ENCED APPLICANT COMPANY DUE AND ON	IN WRITING AND THAT ALL MONTH FINANCE CHARGE (18% PER E SUBJECT TO COLLECTIONS. NTS PAST DUE, INCLUDING FINANCE ACCOMPANYING TERMS AND AND TIMELY PAYMENT WHEN DUE OF				
Name:	Date:						
SET-UP INFORMATION <i>(TO BE COMPLETED BY SALES REPRESENTATIVE)</i>							
Indicate: Tankwagon	_ Transpor	t Combination of	Is Customer Tax Exempt? (Circle One) YES NO				
Estimated Monthly Volume:		Product(s):					
Comments:							
Sales Representative Name: Date:							