



# Customer Application



We at Beard Oil Pipeline Petroleum Inc. appreciate you taking the time to fill out our customer credit application. We understand that you are taking time away from your daily routine to provide us with this information. We look forward to providing you and your company with service above and beyond what you have come to expect from a fuel supplier. The application must be filled out entirely in order for Beard Oil to establish a realistic line of credit to fit your company needs. To guarantee the fastest consideration by Beard Oil please be sure to include all of the information we have requested. If you have additional questions please feel free to contact us toll free at (800) 232-1860. You may also fax your completed credit application to Beard Oil at (989) 773-3619 as it is convenient for you. Thank you! We look forward to doing business with you!

## Credit Application

APPLICANT INFORMATION			
Account name:	Contact person:	Phone:	Fax:
Billing address:	City:	State:	ZIP:
Shipping address:	City:	State:	ZIP:
Payment cycle:		<b>Amount of Credit limit requested:</b>	
E-mail address:			
Federal Employer ID:	Social Security Number (if Applicable):		
<input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Individual <input type="checkbox"/> Other   Dunn & Bradstreet Acct. #			
TYPE OF BUSINESS:		YEARS IN BUSINESS:	
Sales Tax status: <input type="checkbox"/> Exempt <input type="checkbox"/> Non-Exempt		Company Purchase Orders: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Authorized buyer(s):			
Name/Title:			

PLEASE PROVIDE TWO CREDIT REFERENCES; CREDIT REFERENCE 1			
Account name:	Contact person:	Phone:	Fax:
Billing address:	City:	State:	ZIP:
Account number:	Number of years:		

CREDIT REFERENCE 2			
Account name:	Contact person:	Phone:	Fax:
Billing address:	City:	State:	ZIP:
Account number:	Number of years:		

FINANCIAL INFORMATION			
Financial institution:	Contact person:	Contact number:	
Address:	City:	State:	ZIP:
Account number: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	Account number: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
Number of years:	Number of years:		
I authorize my financial institution to release information to Beard Oil Pipeline Petroleum, Inc.		Authorized Signature and Date:	

FOR COMPANY USE ONLY		
Application date:	Verified by:	Date approved:
Account number assigned:	Beard Oil Pipeline Petroleum payment terms: 15 DAYS	

The preceding information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize Beard Oil Pipeline Petroleum, Inc. to investigate all references and customary credit information sources including consumer credit reporting repositories regarding my/our credit and financial responsibility for the purpose of obtaining credit and for periodic review for the purpose of maintaining the credit relationship.

**Credit Policy:** Statements are rendered as net 15 days. C.O.D. restrictions may be placed on any past due account.

**Credit Terms:** All invoices are due net 15 days.

**Venue:** All amounts due for purchases from Beard Oil Pipeline Petroleum, Inc are payable at Beard Oil Pipeline Petroleum, Inc 616 Industrial Drive, Mt. Pleasant, MI 48858. It is further agreed that this agreement is entered into in the State of Michigan and is governed by the laws of the State of Michigan.

**Change of Ownership:** I/We understand that we must notify Beard Oil Pipeline Petroleum, Inc in writing and by certified mail of any change in ownership, the name of the business or structure of the business under which credit is established.

In the event of default, and if this account is turned over to an agency and/or attorney for collection, the undersigned agrees to pay all reasonable attorney fees, and/or costs of collection whether or not suit is filed.

**APPLICANT'S SIGNATURE ATTESTS FINANCIAL RESPONSIBILITY, ABILITY, AND WILLINGNESS TO PAY IN ACCORDANCE WITH ABOVE TERMS:**

Firm Name \_\_\_\_\_

By: \_\_\_\_\_ Title \_\_\_\_\_

**Beard Oil Pipeline Petroleum, Inc**

616 Industrial Drive

Mount Pleasant, MI 48858

PHONE: 989-772-6068 FAX: 989-773-3619

beardoil@winntel.net

Please fax the completed and signed form to 989-773-3619