

WALLIS LUBRICANT, LLC

CUSTOMER CREDIT APPLICATION

All information should be completed by the customer before account can be approved.

Please complete and deliver via email to kdraper@pmilubes.com

CUSTOMER BILLING INFORMATION

Legal Company Name: _____ FEIN: _____

d/b/a (if applicable): _____

Sales Contact: _____ AP Contact: _____

Telephone No: _____ Fax: _____

AP Email: _____

Billing Address: _____

Shipping Address: _____

Are Purchase Orders Required?: _____ Yes _____ No

Where should invoices be sent/emailed?: _____

Where should statements be sent/emailed?: _____

Tax Exempt?: _____ Yes _____ No

If "Yes" Tax Exemption Certificate must be provided

CUSTOMER CREDIT INFORMATION

Have you filed bankruptcy in the last 7 years? _____ Yes _____ No

If yes, Company name and year of filing: _____

Financial Institutions

Bank Name: _____

Bank Address: _____

Bank Contact: _____ Phone: _____

Contact Email: _____

Trade References:

Business Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

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Business Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

Business Name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

OWNERSHIP INFORMATION

Entity Structure: _____ Corp. _____ Partnership _____ LLC

_____ Sole Proprietorship

Years in Business: _____

Principal(s): (1) _____

Name and Address _____

(2) _____

(3) _____

TERMS AND CONDITIONS

Payment Term by Account Type:

- Terms for Dealer/Retail/Marina Fuel Customers are **net 7 days and EFT draft required.**
- Terms for Commercial Transport fuel loads are **net 10 days and may require EFT Draft.**
- Terms for Tank wagon (Bobtail) fuel loads are **net 15 days from date of invoice.**
- Terms for Lubricants are **net 30 days from date of invoice.**

Late Payments / Finance Charges:

Overdue balances are subject to a 1.5% finance charge. Finance charges accrue monthly on invoice

Accounts Receivable Email: wlubear@mail.wallisco.com

Phone: (636) 271-0900

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I certify that all the information on this form is correct. I fully understand your credit terms and agree to the proper payment in consideration of extended credit. I authorize Wallis Companies to check my credit references as listed above. Wallis Companies reserves the right to revoke credit, demand payment in full , and/or reduce the credit line amount. If reasonable collection or legal action is deemed necessary by Wallis Companies to receive monies owed, the collection or legal fees shall also be charged to, and paid by the above person, business, or organization.

Signature of Owner or Officer: _____

Printed Name: _____

Title: _____

Date: _____

GUARANTEE

I, the undersigned do personally guarantee payment to Wallis Companies for previous, present, and future charges to the above business or corporation, hereinafter called the Customer, which shall include orders placed by an officer, employee or agent of the Customer. I also agree to pay all costs of collection, including reasonable attorney's fees in the event of default of payment by the Customer of the Guarantor.

This guarantee shall remain in effect until revoked by the Guarantor by written notification to Wallis Companies by registered mail, or certified mail, return receipt requested. In the event the business is sold, Wallis Companies must be notified in writing, before Guaranty is revoked. The application and guaranty are subject to approval by the credit department of Wallis Companies. Confirmation of approval to the Customer or Guarantor is not required.

Guarentor Signature: _____

Guarentor Name (printed): _____

Guarentor Title: _____

Date: _____