

**CREDIT APPLICATION**  
(PLEASE TYPE OR PRINT NEATLY)

Salesman: \_\_\_\_\_  
Approved By: \_\_\_\_\_

**1. BUSINESS INFORMATION**

**Amount of Credit Applied For:** \_\_\_\_\_

Business Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Business Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax #: \_\_\_\_\_

City, St: \_\_\_\_\_ Type of Business: \_\_\_\_\_

Billing Address (if different): \_\_\_\_\_

County: \_\_\_\_\_ Employer I.D. #: \_\_\_\_\_ In business since: \_\_\_\_\_

Incorporated ( ) Partnership ( ) Sole Proprietorship ( ) DUNS #: \_\_\_\_\_

Date of Incorporation: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_

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Full name of Principles/Corporate Officers	Position	Residence Address
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1. \_\_\_\_\_

City, St : \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

City, St : \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Home Phone: \_\_\_\_\_

If any of the principles have been with the firm less than three years; provide name, location and position with previous business

\_\_\_\_\_  
\_\_\_\_\_

Is the applicant involved in any pending litigation ? \_\_\_\_\_ if so, set forth all details concerning these proceedings:

\_\_\_\_\_  
\_\_\_\_\_

Has the company been involved with a bankruptcy or insolvency proceedings in the past seven (7) years ? \_\_\_\_\_  
If so, set forth all details concerning these proceedings: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List any other name or names under which the applicant transacts business: \_\_\_\_\_

**II. JOBSITE INFORMATION**

Job site location: \_\_\_\_\_

City, St: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you do bonded jobs? \_\_\_\_\_ yes \_\_\_\_\_ no      Bonding Company: \_\_\_\_\_

Bonding Co. Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Contact Person: \_\_\_\_\_

**ARE YOU SUBJECT TO THE FOLLOWING TAXES**

State Sales Tax      \_\_\_\_\_ Yes      \_\_\_\_\_ No  
State Diesel Tax      \_\_\_\_\_ Yes      \_\_\_\_\_ No  
Federal Diesel Tax      \_\_\_\_\_ Yes      \_\_\_\_\_ No  
Franchise Tax      \_\_\_\_\_ Yes      \_\_\_\_\_ No

**If NOT taxable you must furnish EXEMPTION FORMS**

Price Quoted: ITM \_\_\_\_\_ Tank \_\_\_\_\_

**III. BUSINESS AND BANK REFERENCES**

(business references must be relationships of one or more years)

1. \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Fax# \_\_\_\_\_

Doing business with since: \_\_\_\_\_ High Credit: \_\_\_\_\_ Any NSF checks: \_\_\_\_\_

2. \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Fax# \_\_\_\_\_

Doing business with since: \_\_\_\_\_ High Credit: \_\_\_\_\_ Any NSF checks: \_\_\_\_\_

3. \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Fax# \_\_\_\_\_

Doing business with since: \_\_\_\_\_ High Credit: \_\_\_\_\_ Any NSF checks: \_\_\_\_\_

**BANK:** ( institution where account has been active for at least six months)

Bank Name: \_\_\_\_\_ Address: \_\_\_\_\_

Type of Account: \_\_\_\_\_ Account #: \_\_\_\_\_ Any NSF checks in the last six months? \_\_\_\_\_

If so, how many? \_\_\_\_\_ any stop payments in the last six months? \_\_\_\_\_ If so, how many? \_\_\_\_\_

Have there been any executions upon your account in the last year? \_\_\_\_\_

Officer or Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

BILLING  
INFORMATION

Whom to contact with billing questions: \_\_\_\_\_

Phone #: \_\_\_\_\_ Will a purchase order be used \_\_\_\_\_

Will you be paying individual invoice or statement? \_\_\_\_\_

**THE ABOVE SECTIONS MUST BE COMPLETED IN THEIR ENTIRETY TO  
PROCESS YOUR APPLICATION**

**TERMS:** Net amounts due in Fifteen (15) days. Default occurs on the Sixteenth (16) day.

A finance charge of one and one half percent (1.50%) per month will be assessed on any and all amounts past due.

In the event of default requiring collection, the applicant agrees to pay, in addition to the delinquent amount and finance charges thereon, collection and/or attorney fees equal to twenty five percent (25%) of the delinquent amount.

A service charge of twenty-five dollars (\$25.00) will be assessed for each check received which is returned unpaid for any reason.

All deliveries below seventy-five gallons (75) will be assessed a thirty-five dollar (\$35.00) minimum gallon delivery charge.

Upon each annual anniversary date of this agreement, Lancaster Oil Company of Pinellas Inc. and their subsidiaries reserves the right to automatically increase the prices then in effect by the amount of the increase in the Consumer Price Index for the previous twelve months or five percent (5%) whichever is greater.

I HAVE READ, UNDERSTAND AND ACCEPT THE ABOVE TERMS AND HAVE PROVIDED TRUE INFORMATION. I FURTHER AUTHORIZE LANCASTER OIL COMPANY OF PINELLAS INC. TO VERIFY ANY AND ALL REFERENCES GIVEN TO DETERMINE OUR CREDIT CAPABILITIES AND TO REQUEST INFORMATION FROM CREDIT REPORTING AGENCIES.

APPLICANTS NAME: \_\_\_\_\_

BY: \_\_\_\_\_  
SIGNATURE TITLE DATE

PERSONAL GUARANTEE: I/WE INDIVIDUALLY, JOINTLY AND SEVERALLY PERSONALLY GUARANTEE PAYMENT OF ALL INDEBTEDNESS INCURRED FOR MERCHANDISE AND SERVICES FURNISHED BY LANCASTER OIL COMPANY OF PINELLAS INC. INCLUDING FINANCE CHARGES AND COLLECTION OR ATTORNEY FEES EQUAL TO 25% OF THE DELINQUENT AMOUNT. IT IS UNDERSTOOD THAT THIS GUARANTEE SHALL BE A CONTINUING GUARANTEE. I/WE DO HEREBY WAIVE NOTICE HEREOF AND CONSENT TO ANY MODIFICATION OR RENEWAL OF THE CREDIT AGREEMENT HEREBY GUARANTEED.

INDIVIDUAL: \_\_\_\_\_  
SIGNATURE SOCIAL SECURITY NUMBER DATE

INDIVIDUAL: \_\_\_\_\_  
SIGNATURE SOCIAL SECURITY NUMBER DATE

**NOTE:** THE ABOVE STATEMENT MUST BE SIGNED TO ACCEPT FOR PROCESSING

# EXEMPTION CERTIFICATE

## LANCASTER OIL CO. OF PINELLAS INC.

701 43<sup>rd</sup> Street South  
St Petersburg, FL 36771  
727-327-4661 Fax 727-327-4662

The following form of exemption certificate is acceptable and must be adhered to in substance..

Date \_\_\_\_\_

“The undersigned purchaser (“*Purchasers*”) hereby certifies that –

*(check applicable type of certificate)*

\_\_\_\_\_ The diesel or aviation fuel specified in the accompanying order, or on the reverse side hereof

*(or)*

\_\_\_\_\_ All fuel ordered by the Purchaser for a period beginning on \_\_\_\_\_  
and ending \_\_\_\_\_ (period not to exceed 12 calendar months)  
will be used for the following tax-exempt or tax-reduced purposes.

\_\_\_\_\_ (1) Use as a fuel in a school bus or qualified local bus

\_\_\_\_\_ (2) Use as a fuel in a local or inter-city bus (other than a school bus or a qualified local bus)

\_\_\_\_\_ (3) Use as a fuel in a non-taxable use” as that term is defined in section 6427 (1) (2) of the Internal Revenue Code (Such uses include off-highway business uses and use on a farm for farming purposes).

“If this taxable fuel is resold or used for a purpose other than as stated in this certificate, the Purchaser may be subject to tax.

“Purchaser will be prepared to establish by satisfactory evidence the purpose for which purchaser used the product bought under this certification.

“Purchaser understands that any fraudulent use of this certification to buy any taxable fuel free of tax or at a tax reduced rate may subject Purchaser to penalties of perjury, which may include fine or imprisonment.

Federal I.D. Number \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

LANCASTER OIL COMPANY OF PINELLAS  
COUNTY, INC

OPEN LINE OF CREDIT POLICY  
\*\*PLEASE READ CAREFULLY\*\*

- All open account credit terms are net 15 days from the date of the invoice.
- An interest charge of 1.5 per month (18% per annum) will be added on all invoices more than 61 days old.
- Any account 60 days past due will be put on C.O.D. until the account is current.
- There will be a twenty dollar (\$20.00) charge on all returned checks. Any returned check will then be paid in cash, cashier's check, or money order for the amount of the check plus the returned check charge.
- If any action has been taken to collect the amount's due to Lancaster Oil Company you will be responsible for all attorney fees, legal fees, court costs, and/or collection expenses.
- Applicant's signature attests the financial responsibility, ability and willingness to pay our invoices in accordance with the terms of sales stated on the invoice.
- All information given on this credit application is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize Lancaster Oil Company, to investigate the references listed pertaining to my credit and financial responsibility.
- Upon acceptance of this application, and by the assurance of an open line of credit, the applicant agrees to abide by the credit policies of Lancaster Oil Company, and to give advance notice to Lancaster Oil Company of any changes in business ownership or structure.

Company Name \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Title \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_