



Fleetwide Application

335 Mill Rd ♦ Po Box 1308 ♦ Lewiston, ID 83501
Telephone (208) 799-2000 or Toll Free (888) 799-2000
Fax (208) 799-2008 ♦ www.colemanoil.com

Commercial Credit Application & Agreement (Page 1 of 2)

Customer/Business Information (Please Print)

Sales Rep _____ **Date** _____

Full Legal Name _____ DBA _____

Physical Address _____ City _____ St _____ Zip _____

Billing Address _____ City _____ St _____ Zip _____

Phone # _____ Cell # _____ Fax # _____

How would you like to receive your invoice(s) / statement(s)? (Check one) Mail Email

Email Address _____

Method of Payment (Check one) Easy Pay ACH Wire Other _____

Accounts Payable Contact _____ Phone # _____

Business Type _____ Contractor License # _____ Year Established _____

Taxpayer ID (EIN or SS #) _____ D&B # _____

Check one Sole Proprietorship Partnership Corporation LLC Non-profit Government

Owner / Partners/ Spouse's Information

Name _____ SS # _____ DOB _____ Ownership _____ %

Address _____ City _____ St _____ Zip _____

Employment _____ Monthly Income _____ Phone # _____

Name _____ SS # _____ DOB _____ Ownership _____ %

Address _____ City _____ St _____ Zip _____

Employment _____ Monthly Income _____ Phone # _____

Bank Reference

Name of Bank _____ City _____ St _____ Zip _____

Contact _____ Phone # _____ Account # _____

Fleetwide Credit Application Easy Pay (Electronic Fund Transfer) Discount Program

Yes I would like to start saving money with the Easy Pay (Electronic Fund Transfer)

- \$0.05/gallon discount Fleetwide purchases & EFT **DAILY** & Statements & Invoices emailed monthly
- \$0.04/gallon discount Fleetwide purchases & EFT **WEEKLY** & Statements & Invoices emailed monthly
- \$0.03/gallon discount Fleetwide purchases & EFT **TWICE A MONTH** & Statements & Invoices emailed monthly
- \$0.02/gallon discount Fleetwide purchases & EFT **MONTHLY** & Statements & Invoices emailed monthly
- \$0.00/gallon discount Fleetwide purchases & EFT / **EMAIL MONTHLY** Statements & Invoices (see form below)

Easy Pay Authorization (Electronic Fund Transfer)

I (we) _____ hereby authorize Coleman Oil Company to initiate debit & credit entries to my Customer Bank account indicated below for goods & services provided by Coleman Oil Company. I (we) further certify the information set forth below correct and that (we) have contacted and authorized the below named Bank to accept such debit and credit entries from Coleman Oil Company. This authority shall remain in full force and effect until Coleman Oil Company has received written notice from me (or either of us) of its change or termination in such and in such manner as to afford Coleman Oil Company and the Bank a reasonable opportunity to act on it. I (we) understand that this Electronic Funds Transfer service is governed by the rules of The Automated Clearing House and that Coleman Oil Company can terminate or modify it at any time.

****Please Attach a Voided Check** (NOT A DEPOSIT SLIP)**

Bank Name _____ Bank Contact _____ Bank Phone _____

Bank Address _____ City _____ ST _____ Zip _____

Bank 9 Digit Routing Transit# _____ Bank Account# _____

****Authorized Signature **** _____ ***Print Name/Title*** _____ ***Date*** _____



Commercial Credit Application Continued

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Personal Guarantee

In Consideration of Coleman Oil Company granting credit to "Customer" as listed in the "Customer/Business Information" section of this Commercial Credit Application, I personally and unconditionally guarantee to Coleman Oil Company, payment of each and every claim, demand, indebtedness, right or cause of action of every nature whatsoever against the "Customer" now or hereafter existing, due or to become due, held by Coleman Oil Company together with any and all expense including reasonable attorney's fees and costs of litigation, incurred by Coleman Oil Company, in enforcing this agreement, at the offices of Coleman Oil Company. It is understood that this guarantee shall be continuing and irrevocable guaranty and indemnity for all such indebtedness of the company. I understand that my signing below will authorize Coleman Oil Company, to obtain one or more credit bureau report about me now and at anytime in the future. I further authorize any bank with whom I am doing or have done any type of business to give any and all necessary information to you which will assist you in your credit investigation and release any claim I may have for breach of contract of invasion of privacy because of information furnished to you.

****Authorized Signature **** _____ **Print Name** _____ **Date** _____

Address _____ **Phone #** _____ **SS #** _____

****Authorized Signature **** _____ **Print Name** _____ **Date** _____

Address _____ **Phone #** _____ **SS #** _____

Agreement

In Consideration of the opening of a Commercial Heating Fuel, Delivered Fuels, or Cardlock account, and the receipt of cardlock fuel cards, the undersigned, hereafter referred to as "Customer" agrees to the following terms in all credit transactions with Coleman Oil Company, an Idaho Corporation, hereafter referred to as "Coleman Oil" unless otherwise modified in writing by an authorized representative of Coleman Oil:

1. This agreement is a continuing agreement and shall remain in force until such time as Coleman Oil receives written notice of termination from Customer. Coleman Oil reserves the right, at its sole discretion and without notice, to terminate this agreement, change credit limits or other credit terms at any time.
2. Customer, by signing this document, authorizes any of Customer's financial account holders and references to answer Coleman Oil's questions regarding Customer's credit history and any financial matters, and the release to Coleman Oil of any oral or written information related to Customer's accounts with Customer's references or financial account holders, and authorizes Coleman Oil to secure information regarding Customer's credit history from any commercial or consumer reporting agency or trade organization.
3. Customer agrees that all amounts payable, as shown on Coleman Oil's invoice, will be paid by the due date stated on the invoice, and if the amounts due are not paid on or before the due date, the account is delinquent. Customer agrees if an account is delinquent Coleman Oil may assess a late fee and a finance charge, on or after the day the account becomes delinquent.
4. Customer must maintain an account balance at or below the credit limit established by Coleman Oil for Customer's account(s).
5. For each returned (insufficient fund) check, or electronic funds transfer where there are insufficient funds, Customer agrees Coleman Oil shall collect the amount of the check or the amount due plus a reasonable handling charge as determined by Coleman Oil.
6. Customer represents, warrants and acknowledges that credit extended by Coleman Oil will be for business use only and not for personal, consumer or household use.
7. Customer will notify Coleman Oil of any lost Cardlock card immediately upon discovering a card has been lost or stolen. Notice may be given to Coleman Oil orally but must be confirmed by Customer in writing to Coleman Oil within 24 hours of the oral notification by registered or certified mail. Customer agrees to pay for all Commercial Fueling System charges prior to receipt of written notice.
8. In the event Coleman Oil retains an attorney and/or commences any legal proceeding or action to collect amounts due, Customer agrees to pay (in addition to all sums due Coleman Oil for merchandise supplied and service charges) all expenses incurred by Coleman Oil including attorney fees, collection fees, court costs, finance charges.
9. This agreement is made under and shall be governed by, and construed and enforced in accordance with, the substantive laws of the State of Idaho or the State of Washington. Customer waives any objection to jurisdiction and venue in any action instituted against them and agrees not to assert any defense based on lack of jurisdiction or venue. By signing this agreement, the customer submits to the personal jurisdiction of the courts of the State of Idaho or the State of Washington for resolution of any claim, and agrees not to contest venue in Nez Perce County, Idaho or Asotin County, Washington.
10. Customer warrants all information provided to be true and correct.

Customer/Business Name: _____

****Authorized Signature**** _____ **Print Name/Title** _____ **Date** _____

****Authorized Signature**** _____ **Print Name/Title** _____ **Date** _____

FOR OFFICE USE ONLY

Credit Manager Signature	Date	Secondary Approval (if required)	Date
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ACCOUNT AUTHORIZATION

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Account Name

Authorized Individuals

The individuals listed below have the authority to request and authorize any changes to the account listed above. *Any limitations that these individuals may have should be noted on this form.*

Full Name	Nickname	Notes
Full Name	Nickname	Notes
Full Name	Nickname	Notes
Full Name	Nickname	Notes
Full Name	Nickname	Notes
Full Name	Nickname	Notes

Inquiry-Only Individuals

The individuals listed below have inquiry-only authorization which is limited to allowing them to obtain information on the account listed above. They are not authorized to make any changes.

Full Name	Nickname	Notes
Full Name	Nickname	Notes
Full Name	Nickname	Notes
Full Name	Nickname	Notes
Full Name	Nickname	Notes
Full Name	Nickname	Notes

By signing this form, I authorize Coleman Oil Company to release information pertaining to my account listed above to the individuals I've included on this form. I understand that I am responsible for informing Coleman Oil Company of any changes to the authorizations by completing, signing and submitting a new Account Authorization form. I have listed the necessary limitations (if any) for each authorized individual.

APPLICANT (Authorized Signer)	
Authorized Signature	
Printed Name	**Date**
Title	