

COMMERCIAL CREDIT APPLICATION

Please complete and mail or fax to:

State of Incorporation:____

Deiter Bros. Fuel Co., Inc. Credit Department 1226 Stefko Blvd. Bethlehem, PA. 18017-6694			
610-868-8566 Fax 610-861-5148			
Approved By:			
Customer Rep:			
(PLEASE TYPE OR PRINT NEATLY)			
I. BUSINESS INFORMATION			
Amount of Credit Applied For:			
Business Name:			
Business Address:			
City:	State:	ZIP:	
Billing Address (if different):			
City:	State:	ZIP:	
Business Telephone:			
Business Fax:			
Business website			
County: Employe	er I.D. Number.:		
In Business Since:			
[] Incorporated [] Partnership [] Sole Prop	rietorship		
Date of Incorporation:			

Full Name of Principals/Corporate Officers

1		
Social Security Number:	Home Pho	ne:
2		
Social Security Number:	Home Pho	ne:
If any of the principals have been with with previous business:	h the firm less than 3 years; pro	vide name, location and position
Is the applicant involved in any pendi If so set forth all of the details concern		
Has the company been involved with	a bankruptcy or insolvency pro-	ceedings in the past seven (7) years?
If so, set forth all details concerning the	hese proceedings:	
List any other name or names under w	which the applicant transacts bus	iness:
II. JOB SITE INFORMATION (co		
Job Site Location:		
City:		ZIP:
Do you do bonded jobs? [] Yes [] No		
Bonding Company:		
Bonding Company Address:		
City:	State:	ZIP:
Telephone Number:	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

III. BUSINESS REFERENCES

(NOTE: Business references must be relationships of one or more years)

1				
Address:				
Phone:	Fax:			
Doing business with since:	High Credit:			
2				
Address:				
Phone:	Fax:			
Doing business with since:	High Credit:	_		
3				
Address:				
Phone:	Fax:			
Doing business with since:	High Credit:	_		
IV. BANK INFORMATION (NOTE: Institution where account has been active for at lease six months)				
Bank Name:				
Address:				
Type of Account:				
Account Number:				
Any NSF checks in the last 12 mor	nths? If so, how many:			
Any stop payments in the last six n	nonths? If so, how many:			
Have there been any executions upon your account in the last year?				
Officer or Contact Name:				
Phone:F	³ ax: E-mail			

V. BILLING INFORMATION

Who to contact with billing questions:		
Phone Number:		
E-mail address		
Will a Purchase Order be used: [] Yes [] No		
Will you be paying by individual invoice or by statement?		

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

TERMS:

Net amount due within terms indicated on invoice. Default occurs one day after due date. Finance charge of one and three quarters percent (1.75%) per month, (21% annually), 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 attorney fees.

Customer consents to the personal jurisdiction of District Court 03-02-11 and/or, where applicable, and at the discretion of Deiter Bros., the personal jurisdiction of the Court of Common Pleas of Northampton County, Pennsylvania, and the United States Federal District Court of Pennsylvania in it's Eastern District. Customer agrees not to raise any objection to such jurisdiction or the laying of venue in Northampton County, Pennsylvania.

A service charge of \$50.00 will be assessed for each check received which is returned unpaid for any reason.

I HAVE READ, UNDERSTAND, AND ACCEPT THE ABOVE TERMS AND HAVE PROVIDED TRUE INFORMATION. I FURTHER AUTHORIZE DEITER BROS. FUEL CO., INC. TO VERIFY ANY AND ALL REFERENCES GIVEN TO DETERMINE OUR CREDIT CAPABILITIES AND TO REQUEST INFORMATION FROM CREDIT REPORTING AGENCIES.

Applicant/Firm Name: _____

By: ______ (SIGNATURE TITLE)

(DATE)

PERSONAL GUARANTEE: I/WE INDIVIDUALLY, JOINTLY AND SEVERALLY PERSONALLY GUARANTEE FULL AND PROMPT PAYMENT OF ALL INDEBTEDNESS INCURRED FOR MERCHANDISE AND SERVICES FURNISHED BY DEITER BROS. FUEL CO., INC., INCLUDING FINANCE CHARGES AND COLLECTION AND ATTORNEYS FEES. IT IS UNDERSTOOD THAT THIS GUARANTEE SHALL BE A CONTINUING GUARANTEE. I/WE DO HEREBY WAIVE NOTICE OF DEFAULT, NON-PAYMENT AND NOTICE HEREOF AND CONSENT TO ANY MODIFICATION OR RENEWAL OF THE CREDIT AGREEMENT HEREBY GUARANTEED. FURTHER, THE CUSTOMER AUTHORIZES THE CLERK OF COURTS OR ANY ATTORNEY OF ANY COURT OF RECORD OF THE COMMONWEALTH OF PENNSYLVANIA OR ELSEWHERE TO APPEAR FOR AND TO CONFESS OR ENTER JUDGEMENT AGAINST CUSTOMER ON THE PURCHASE INVOICE FOR SUCH UNPAID BALANCE PLUS COSTS, INTEREST AND ATTORNEY'S FEES, WHICH INVOICE WILL CONSTITUTE THE INSTRUMENT ON WHICH JUDGEMENT WILL BE CONFESSED

Individual:	(Signature)
Social Security Number:	_Date:
Individual:	(Signature)
Social Security Number:	_Date:

NOTE: The above statement MUST be signed to be accepted for processing.