

OFFICE:
703-978-6400

FAX:
540-338-6401



OFFICE: 115 East Main Street • Purcellville, Va 20132

BUSINESS CREDIT CONTRACT

Salesman _____ Date _____

Type of Business/Organization (check one)

Single Proprietorship Partnership Corporation (State)

Amount of credit requested \$ _____

Firm Name	Fed ID # or SS#	Type of Business	Date Established
Owner/Partner/Officer	Title	Owner/Partner/Officer	Title
Business Address		Business Phone	
Billing Address		Business Fax	
Email Address <input type="checkbox"/> EMAIL BILLING			

CURRENT FUEL SUPPLIER:

Company Name	Address		
Contact	Telephone	Account Number	
Email Address	Fax		

BANK REFERENCES:

Bank and Branch, Person to Contact	Bank and Branch, Person to Contact
Account Number <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan	Account Number <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan

The above information is for the purpose of obtaining credit history and will be kept strictly confidential

Has the applicant or any of its owners, principals, partners, officers, or directors ever filed a voluntary petition in bankruptcy, been adjudged bankrupt, or made an assignment for the benefit of creditors? YES NO

Account Payable Office: Name _____ Phone: _____ Fax: _____

CONTINUED

CREDIT POLICY TERMS AND CREDIT AGREEMENT

NET: UPON RECEIPT OF INVOICE

1. A LATE CHARGE will be assessed on balances over 30 days. This is computed by a periodic rate of 1.5% (which is an annual percentage rate of 18%) on the portion of the previous balance over 30 days less payments and credits appearing on the statement. An account is considered PAST DUE when a LATE PAYMENT CHARGE is assessed. Any account which becomes past due may be subject to termination of services WITHOUT NOTICE until the balance is paid in full.
2. Any account which is turned over to an attorney will be charged with all of Capitol Discount Fuel's attorney fees and costs of collection.
3. A service charge of \$35.00 will be applied when a check is returned by the bank.

I certify that the information contained in this document is true and accurate and is submitted to Capitol Discount Fuel in conjunction with a request for credit. References listed are authorized to release any credit information to Capitol Discount Fuel. A copy of this authorization shall be as valid as the original.

Please Print Name and Title

Signature

Company Name

Date

PERSONAL GUARANTY

In consideration for the extension of credit for the purchase of goods or services to the applicant, THE UNDERSIGNED PERSONALLY GUARANTEES THE UNCONDITIONAL PAYMENT OF ANY UNPAID AMOUNT UPON APPLICANT'S ACCOUNT. This is a guarantee of payment and not merely of collection; no collection or civil action need be commenced against the Applicant prior to a demand being made upon the undersigned. A copy of this guarantee shall be as valid as the original.

Guarantor Signature

Date

Guarantor Signature

Date

Please Print Name and Title

Please Print Name and Title

CREDIT INVESTIGATION AUTHORIZATION

I hereby authorize Capitol Discount Fuel to make whatever credit investigation they may deem appropriate and to exchange any information they may receive in the course of such investigations. A copy of this authorization shall be as valid as the original.

Guarantor Signature

Date

Guarantor Signature

Date

Please Print Name and Title

Please Print Name and Title

