

Dear Customer,

Attached you will find a Request For Credit Application. Please read the following instructions prior to filling out this form.

- Please type or write legibly on the credit application.
- Make sure the application is filled out in its entirety. If you have a reference sheet that you would like to attach, you may write, “see attached” across the reference section of the application.
- Make sure OUR application is signed and dated. We **will not** be able to process your request without a signature.
- FAX NUMBERS must accompany ALL Credit References. We **will not** be able to process your request without this.
- Credit References **must** be current; this means that you should list the references that you have actually used within the past year, This is to ensure that you receive a good reference and are able to establish credit with our company.

Credit Applications may take up to two weeks to process, depending on the amount and correctness of the information provided to us. If you have any questions, please feel free to contact us.

**COLORADO PETROLEUM COMPANY**

4080 Globeville Rd.  
Denver, CO 80216  
Phone: (303) 294-0302  
Fax: (303) 294-9128

**COMPANY INFORMATION**

**COMPANY NAME:** \_\_\_\_\_ **CREDIT LIMITS:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**DATE COMPANY FORMED:** \_\_\_\_\_ **HRS OF OPERATION:** \_\_\_\_\_

**PLEASE CHECK ONE:** INDIVIDUAL \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ CORPORATION \_\_\_\_\_

**PRODUCT YOU ARE INTERESTED IN PURCHASING:**

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

**OWNER/OFFICERS INFORMATION**

NAME	POSITION	ADDRESS	SS#
_____	_____	_____	_____
_____	_____	_____	_____

**TAX INFO.**

**TYPE OF BUSINESS:** \_\_\_\_\_

**STATE TAX#** \_\_\_\_\_ **CITY TAX#** \_\_\_\_\_ **FED. TAX #** \_\_\_\_\_

1.) ARE YOU EXEMPT FROM THE STATE DIESEL TAX? **YES** \_\_\_ **NO** \_\_\_

(IF EXPEMT PLEASE PROVIDE CERTIFICATE, AFFIDAVIT OR LISCENSE.)

2.) WILL ALL PRODUCTS YOU PURCHASE BE FOR RESALE? YES \_\_\_ NO \_\_\_, IF NO, SPECIFY WHICH PRODUCTS YOU SHOULD BE CHARGED SALES TAX ON:

**CREDIT REFERENCES**

(PLEASE PROVIDE AT LEAST 3 OF THE 4)

**PROVIDE PHONE AND FAX #'S PLEASE**

1.) \_\_\_\_\_

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

3.) \_\_\_\_\_

4.) \_\_\_\_\_

**BANK INFORMATION**

BANK NAME \_\_\_\_\_ CONTACT OFFICER \_\_\_\_\_

FAX# \_\_\_\_\_ ACCOUNT# \_\_\_\_\_

BANK NAME \_\_\_\_\_ CONTACT OFFICER \_\_\_\_\_

FAX# \_\_\_\_\_ ACCOUNT# \_\_\_\_\_

PLEASE ATTACH MOST RECENT COPY OF FINANCIAL STATEMENT

**BANK INQUIRY FORM**

Date: \_\_\_\_\_

Dear Customer, in order that we may intelligently consider establishing an open account, we would appreciate your bank's cooperation in completing the following information. In order to do so we need your signature to retrieve this information.

**CUSTOMER FILLS OUT:**

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Checking Account # \_\_\_\_\_

**Bank Use Only:**

(please fax back to 303-294-9128)

Date Opened: \_\_\_\_\_

Account Figure:

Low \_\_\_\_\_

Med \_\_\_\_\_

High \_\_\_\_\_

Loans Granted:

Frequently \_\_\_\_\_

Occasionally \_\_\_\_\_

Seldom \_\_\_\_\_

High Credit: \_\_\_\_\_

Revolving line of credit \_\_\_\_\_

Secured \_\_\_\_\_ Unsecured \_\_\_\_\_

Total Balance Outstanding \_\_\_\_\_

Secured \_\_\_\_\_ Unsecured \_\_\_\_\_

Past Due if Any \_\_\_\_\_

Secured \_\_\_\_\_ Unsecured \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

**CUSTOMER FILL OUT:**

SIGN: \_\_\_\_\_ PRINT: \_\_\_\_\_

**Customer Authorization**

**TERMS OF PAYMENT**

- 1.) All gas and diesel fuel purchases are due on a net 10 day basis only and must be cash, check, or electronic funds transfer only (EFT).
- 2.) All other purchases made during the month are due the 10<sup>th</sup> of the following month regardless of the date of purchase.
- 3.) If payment has not been received by the last day of the month, a 1.5% late charge (18% A.P.R.) will be charged against the overdue amount. Refusal to pay these will suspend credit until arrangements are made for payment.
- 4.) Any account 30 days overdue automatically reverts to a temporary C.O.D. status until arrangements are made for payment.
- 5.) Any account 60 days overdue will be placed on a permanent C.O.D status.
- 6.) If your account is placed for collections, you will be liable for all collection and/or attorney fees.
- 7.) Clark Thompson or Terry Thompson and Credit Manager must approve payment arrangements other than those stated above, beforehand.

---

I, \_\_\_\_\_ fully understand the terms of payment set forth above and agree to abide by them.

Print: \_\_\_\_\_ Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

**PLEASE ANSWER:**

- 1.) Do you use purchase orders? Yes \_\_\_\_\_ No \_\_\_\_\_
- 2.) Name of person to confirm orders: \_\_\_\_\_
- 3.) Contact person concerning payment: \_\_\_\_\_
- 4.) Means of payment: Cash \_\_\_\_\_ Check \_\_\_\_\_ EFT \_\_\_\_\_

**PERSONAL GUARANTY**

The undersigned, \_\_\_\_\_ hereby personally guarantees the full, due and punctual performance by \_\_\_\_\_ (company name), Of all its obligations and liabilities with respect to the debt and other obligations of Company owing to Colorado Petroleum Products Company (“CPPC”) incurring under the certain credit arrangement by and between Company and CPPC dated: \_\_\_\_\_ of \_\_\_\_\_ (the “credit arrangement”) and further represents, warrants and covenants that:

- (a) Company is incorporated and in good standing under the laws of \_\_\_\_\_
- (b) This guaranty is made for the benefit of CPPC and to induce CPPC to enter the “Credit Arrangement” regarding payment of product delivered by CPPC;
- (c) The undersigned has full power and authority to enter into and perform this Guaranty; the making and performance of this Guaranty will not only violate and provision of or result in the acceleration of any obligation under any mortgage, lien, lease, indenture, other instrument or agreement, order, judge mentor, decree to which the Guaranty is the valid and binding obligation of the undersigned enforceable in accordance with its terms;
- (d) This Guaranty shall remain in full force and effect without regard to, and shall not be affected or impaired by, any amendment to the “Credit Manager”, or any sale or transfer of all or any part of the undersigned’s ownership of the stock of Company, or any voluntary or involuntary liquidation, dissolution, sale of assets, insolvency, reorganization, bankruptcy, or filing for bankruptcy of Company, or any affiliate thereof; and this Guaranty shall be in addition be binding upon all successors and assigns of the undersigned;
- (e) \_\_\_\_\_’s obligations under this Guaranty are independent of those of the Company \_\_\_\_\_ waives the right to require CPPC to proceed against the Company or any other person or entity or to pursue any other remedy; and
- (f) \_\_\_\_\_ is a married individual and agrees that the obligations under this Guaranty may be enforced against his separate property and against the community property of \_\_\_\_\_ and his/her spouse. This Guaranty is a guaranty with respect to the “Credit Arrangement” and shall apply thereto until same is paid in full.

The invalidity or unenforceability of any provisions of this Guaranty shall not affect the remaining provisions.

This Guaranty shall be governed by Colorado law and may be amended only by an instrument executed by Guarantor and CPPC.

Print: \_\_\_\_\_ Sign: \_\_\_\_\_  
Date: \_\_\_\_\_

**Dear Valued Customer,**

COLORADO PETROLEUM PRODUCTS COMPANY is very pleased to offer a new way of receiving invoices.

We now have the capability of faxing OR e-mailing invoices, this will enable you to receive your invoice on the next business day after delivery. This will speed up the processing and eliminate having to wait for the mail to arrive.

If you would like to participate, please fill out the form below and fax it to us at 303-294-9128 or mail it back to us at COLORADO PETROLEUM PRODUCTS- 4080 GLOBEVILLE RD, DENVER, CO. 80216

Thank you in advance.

---

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

Please E-mail: \_\_\_\_\_ Please Fax: \_\_\_\_\_ (check one)

E-mail Address: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Please send to the attention of: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_