



700 27TH AVENUE SE
KILLDEER, ND 58640-9379
TOLL-FREE: 1-877-764-BENZ
TELEPHONE: 701-764-5556
FAX: 701-764-6499
WWW.BENZOILCO.COM

CREDIT APPLICATION

New Account Application Account Update

Have you ever had an account with us? Y or N Previous Account # _____

Name or Business: _____ E-Mail: _____

Current Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____ Fax: _____

Less Than Two Years Previous Address:

Previous Mailing Address: _____

City: _____ State: _____ Zip: _____

Closest Living Relative Name: _____ Telephone: _____

Corporate Name (if different from d/b/a name): _____

State of Incorporation/Organization: _____ Date of Incorporation/Organization: _____

Taxpayer Identification Number (FEIN) #: _____ Sales Tax Permit/Registration #: _____

State of Certification: _____

Type of Business: _____ Credit Limit: _____

Sales Tax Resale Certificate

ATTACH A COPY OF YOUR SALES TAX RESALE CERTIFICATE;

IF NOT INCLUDED WITH THIS APPLICATION BENZ OIL COMPANY INC. WILL CHARGE SALES TAX.

Company Owner(s)

Name: _____ Name: _____

Title: _____ Title: _____

Address: _____ Address: _____

Soc. Sec. #: _____ Soc. Sec. #: _____

Telephone: _____ Telephone: _____

SERVICE(S) OF INTEREST

CARDTROL FUEL DELIVERIES PROPANE OIL/GEAR LUBE TANK LEASE

BUSINESS INFORMATION

Years in Operation: _____ Type of Business: _____

A/P Manager: _____ A/P E-Mail: _____

A/P Telephone: _____

BANK INFORMATION

Bank Name: _____ Account Name: _____

Address: _____ Telephone: _____

Payment Options: ACH Payment (complete section below) Other, Please Specify: _____

Routing Number: _____ Account Number: _____

I authorize Benz Oil Company Inc. to initiate debit or credit entries to the account indicated in the Bank Information and ACH Enrollment Sections above. I authorize and request the bank to honor the debit or credit entries initiated by Benz Oil Company to this account. I further understand that any dishonored draft will be due and payable immediately via a bank wire transfer. This authority is to remain in full force and effect until it is terminated upon three business days written notice to Benz Oil Company.

Signature _____ Title: _____ Date: _____



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The information provided on this application is complete and accurate. I authorize Benz Oil Company Inc. to inquire on our credit history. The company which I represent is identified above, financially capable and will pay Benz Oil Company all invoices according to their terms. All invoices, out of terms, are subject to 1.5% interest per month. Collection fees, legal fees and court costs are recoverable by Benz Oil Company, if account is turned over to a third party collection agency, or if legal action is taken to recover payment.

Signature _____ Title: _____ Date: _____

ACH TERMS:

1. CARDTROL: 3 DAY ACH TERMS
2. PROPANE: 10 DAY ACH TERMS
3. FUEL DELIVERIES, OIL/GEAR LUBE, TANK LEASE: 15 DAY ACH TERMS

ACH payment notice will be sent via e-mail two days before draft.

CARDTROL ACCOUNTS REQUIRE AUTOMATIC ACH PAYMENT:

- 1-4 CARDTROL CARDS-ACH IS ON 15TH AND LAST DAY OF THE MONTH
- 5 OR MORE CARDS-ACH IS WEEKLY