



Casper  
P.O. Box 189  
Evansville, WY 82636  
Office:(307)234-9812  
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Cheyenne  
1807 E Fox Farm Rd  
Cheyenne, WY 82007  
Office:(307)632-7616  
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Laramie  
720 Skyline Rd  
Laramie, WY 82070  
Office:(307)742-5667  
Fax:(307)742-9044

Scottsbluff  
2475 10<sup>th</sup> St  
Gering, NE 69341  
Office:(308)633-2764  
Fax:(308)633-2766

## Application for Credit

### Account Information

Credit Limit Desired \_\_\_\_\_ Credit Limit Approved \_\_\_\_\_

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

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

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone \_\_\_\_\_ Fax: \_\_\_\_\_

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

**BANK REFERENCE:** Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_ Bank Phone: \_\_\_\_\_

Account Officer: \_\_\_\_\_ Account Number: \_\_\_\_\_

**BUSINESS INFORMATION:** Company Federal Tax I.D. No.: \_\_\_\_\_

How long in business: \_\_\_\_\_ State Tax I.D. No.: \_\_\_\_\_

**List each state that you are a licensed Distributor and attach a photocopy of your license for each state.**

**Circle appropriate entity: CORPORATION, PARTNERSHIP OR PROPIETORSHIP:**  
(List two officers who will deal with Dooley Oil Inc here; list all other officers at end of form)

Title: \_\_\_\_\_ Name \_\_\_\_\_ Address: \_\_\_\_\_

Title: \_\_\_\_\_ Name: \_\_\_\_\_ Address: \_\_\_\_\_

### **CREDIT REFERENCES:**

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_



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**TERMS AND CONDITIONS OF GRANTING OF CREDIT**

1. If credit is granted, \_\_\_\_\_ [Name of Entity] ("Credit Applicant") and \_\_\_\_\_, [Name of Guarantor(s)] ("Guarantor") agree to pay all statements in accordance with the terms of Dooley Oil Inc. ("Dooley") monthly invoice ("Invoice"), including payment within times specified in the invoice, late fees, and interest accruing at the rate of twenty four percent (24%) per annum for delinquent accounts. **If the account becomes delinquent and is turned over to a third party for collection, I/we agree to pay all reasonable attorney's fees plus all attendant costs and fees incurred in collecting the delinquent amount, whether or not suit is instituted.**

- 2. If there is any disputed charge on the Invoice, I/we agree to notify Dooley in writing within twenty (20) days after receipt of Invoice. Failure to so notify Dooley in writing means that I/we agree that the charges reflected on the Invoice are correct.
- 3. I/we agree to immediately notify Dooley in writing of (i) any change of ownership or form or our business (ii) any change of address, telephone, or facsimile number.
- 4. By executing this agreement on behalf of the above listed applicant, I/we warrant and represent that the information given on this Credit Application is complete and correct, and that the undersigned have the authority to bind the Credit Applicant and Guarantors and enter into this agreement.
- 5. By executing this agreement, the Guarantors signing herein hereby **personally guaranty** the payment of all obligations for the Credit Applicant, including all collection costs and attorneys' fees associated with collection.
- 6. I/we give Dooley permission to verify the information stated hereon. Such verification may include contacting any reference given, or any other investigation desired by Dooley.
- 7. This extension of credit may be used for commercial and/or personal residential household purposes.
- 8. This agreement may only be modified or amended by signed writing.
- 9. The provisions contained in this application are severable and if any single provision is found to be unenforceable, it shall not make the remainder of this agreement unenforceable

I/we herein make application to Dooley Oil Inc., for credit and agree to be bound by the provisions listed above.

CREDIT APPLICANT:  
(Company Name)

CREDIT APPLICANT:  
(Company Name)

: \_\_\_\_\_

: \_\_\_\_\_

BY: \_\_\_\_\_  
(Signature)

BY: \_\_\_\_\_  
(Signature)

Name: \_\_\_\_\_  
(Print Name)

Name: \_\_\_\_\_  
(Print Name)

Title: \_\_\_\_\_

Title: \_\_\_\_\_



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**\*\*GUARANTOR INFORMATION\*\***

:

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

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

Fax: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_

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

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

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

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

Fax: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_

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

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

**Other Corporate Officers:**

Title: \_\_\_\_\_

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

Title: \_\_\_\_\_

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

**Accounts Payable Information:**

Contact: \_\_\_\_\_

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

\_\_\_\_\_

Telephone: \_\_\_\_\_

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



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**EFT Authorization**

I (We) \_\_\_\_\_, Hereby certify the information set forth below is correct and do authorize Dooley Oil Inc. to initiate debt and credit entries to my (our) account indicated below. Which account, is used solely for business purposes for payment of all obligations determined by Dooley Oil Inc. to be owed by me (us) as a customer to Dooley Oil Inc., and all obligations determined by Dooley Oil Inc. to be owed by Dooley Oil Inc. to me (us) as a customer.

**Customer Name:** (your information)

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

\_\_\_\_\_  
**City, State, Zip Code:** \_\_\_\_\_

\_\_\_\_\_  
**Telephone Number:** \_\_\_\_\_

\_\_\_\_\_  
**Customer's Bank Name:**

\_\_\_\_\_  
**Bank Address:**

\_\_\_\_\_  
**City, State, Zip Code:**

\_\_\_\_\_  
**Bank Telephone Number:**

\_\_\_\_\_  
**Bank Contact Person:**

\_\_\_\_\_  
**Customer Bank Account Number:**

\_\_\_\_\_  
**Customer Bank Routing Number:**

I (we) Further certify that I (we) have contacted and authorized the above named bank to accept such debit and credit entries from Dooley Oil Inc. This authority shall remain in full force and effect until Dooley Oil Inc. and the above named Bank have received written notification from me (us) of its termination in such time and manner as to afford Dooley Oil Inc. and the Bank reasonable opportunity to act upon it. I (we) understand that this EFT service is governed by the rules of the Automatic clearing House or ACH, and that Dooley Oil Inc. can terminate or modify it at any time.

Dated: \_\_\_\_\_

Signed: \_\_\_\_\_



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**Invoice & EFT information**

Dooley Oil Inc. has changed the invoice and EFT procedure. We will not be faxing your invoices and EFT's to you. We feel this will enable us to get your invoices and EFT's to you in a more timely manner.

FAX: \_\_\_\_\_

If you have no Fax, list your **mailing address**:

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_