



**CONFIDENTIAL BUSINESS CREDIT APPLICATION FOR DIVISIONS OF
BAILEY ENTERPRISES INC**

Please complete the following form in its entirety

INCOMPLETE APPLICATIONS MAY BE RETURNED UNPROCESSED

Business Name (DBA): _____

Company Name: _____

Products Use/ Nature of Business: _____ Years in Business: _____

Year Incorporated: _____ State: _____ Social Security Number: _____

Federal Identification Number: _____ DUNS# _____

BILLING ADDRESS:

Address: _____ City: _____ State: _____ Zip Code: _____

PHYSICAL ADDRESS:

Address: _____ City: _____ State: _____ Zip Code: _____

OWNER/ PARTNER INFORMATION:

First Name: _____ MI: _____ Last Name: _____

Birth Date: _____ Work Phone: _____

Cell Phone: _____ Home Phone: _____

Social Security Number: _____ E-Mail Address: _____

OWNER/ PARTNER INFORMATION:

First Name: _____ MI: ____ Last Name: _____
Birth Date: _____ Work Phone: _____
Cell Phone: _____ Home Phone: _____
Social Security Number: _____ E-Mail Address: _____

OWNER/ PARTNER INFORMATION:

First Name: _____ MI: ____ Last Name: _____
Birth Date: _____ Work Phone: _____
Cell Phone: _____ Home Phone: _____
Social Security Number: _____ E-Mail Address: _____

PLEASE LIST COMPANY CONTACT INFORMATION:

Primary Contact Information

First Name: _____ MI: ____ Last Name: _____
Work Phone: _____ Extension: _____ Cell Phone: _____
Fax: _____ E-Mail Address: _____

Purchasing Information

First Name: _____ MI: ____ Last Name: _____
Work Phone: _____ Extension: _____ Cell Phone: _____
Fax: _____ E-Mail Address: _____

Accounts Payable Information

First Name: _____ MI: ____ Last Name: _____
Work Phone: _____ Extension: _____ Cell Phone: _____
Fax: _____ E-Mail Address: _____

BANKING INFORMATION:

Fill out below or attach credit references.

Bank Name: _____

Account Number: _____ Phone: _____

Contact: _____

City: _____ State: _____ Zip code: _____

CREDIT AMOUNT REQUESTED _____

LOCAL CREDIT REFERENCES:

Creditor's Name: _____ City: _____ State: _____

Phone Number: _____ Email _____

Creditor's Name: _____ City: _____ State: _____

Phone Number: _____ Email _____

Creditor's Name: _____ City: _____ State: _____

Phone Number: _____ Email _____

Creditor's Name: _____ City: _____ State: _____

Phone Number: _____ Email _____

ATTACH ADDITIONAL CREDIT REFERENCES IF NEEDED

IF YOUR BUSINESS IS SALES TAX EXEMPT PLEASE FILL OUT AND SIGN A SALES TAX EXEMPTION FORM

ACCOUNT TYPE (Check all that apply):

- Bailey Oil Fuel Depot/ Pit Stop Travel Centers Card (Please Complete Vehicle & Driver Form)
- Red Horse Energy/Red Horse Oil/Bailey Oil Company - Bulk Fuel, Chemicals & Lubricants
- Bailey Tire & Auto Service - Tires & Vehicle Maintenance
- Central Wyoming Transportation - HAZMAT Transportation

TERMS & CONDITIONS

All sales are considered taxable unless we have on file valid current documentation to the contrary. Please attach the appropriate exemption certificates or documentation. I/We the undersigned, hereby authorize the above listed credit and bank references to release credit information to **Bailey Enterprises, Inc.** I/We certify that all the information on this form is correct. In consideration, for credit & payment terms granted, I/We agree to abide by the terms and conditions of this agreement and agree to pay all the amounts when due. All invoices are due as stated on the invoice or no later than 10th of the following month following the transaction. A monthly service charge of "Daily Periodic Rate" of .05% or 1.5% per month will be assessed on account balances which are past due.

In consideration for granting credit to Customer and in compliance with the federal, "Truth In Lending" law, the Undersigned, as Customer, agrees with **Bailey Enterprises, Inc.** as Seller to the following:

1. All transactions must be in U.S. dollars.
2. Past due accounts will be placed on a COD basis.
3. **Bailey Enterprises, Inc.** has the right to change the terms of this agreement at any time. Customer will be notified of the changes in writing. Use of the account after the effective date of the changes will constitute acceptance of the new terms.
4. Credit terms and/or line of credit may change based on available credit information.
5. Past due balances shall be subject to the maximum Finance Charge allowed by law. Customer agrees to pay Finance Charges. Refusal to pay Finance Charges is grounds to close account. Finance Charges are considered a legally liable debt. Past due balances may be reported to credit reporting agencies and legal action may be taken to collect Finance Charges.
6. Finance Charge is computed using a "Daily Periodic Rate" of .05% or 1.5% per month.
7. Customer recognizes that if the account must be collected through the court processes, **Bailey Enterprises, Inc.** will incur expenses and losses resulting from personnel time and other in house costs. Customer agrees that **Bailey Enterprises, Inc.** should be compensated for such costs and losses but that the actual amount of such costs may be difficult to determine. Therefore, the Customer agrees that if **Bailey Enterprises, Inc.** collects the amount through the court process, the court should include in the judgment, in addition to attorney fees and other costs of collection, an additional assessment equal to 10% of the account balance but in any event no less than \$250.
8. Returned checks will be charged the maximum fee allowed by law. Returned checks not made good immediately may be turned over for legal action.

Personal Guarantee(s): Each of the undersigned, in consideration of the credit terms granted to the above Applicant, hereby jointly and severally guaranteed to **Bailey Enterprises, Inc.** that payment will be made in accordance, with the terms approved by **Bailey Enterprises, Inc.** all amounts owed and reasonable costs of collection, including attorney's fees and interest. The undersigned waive notice of acceptance of this guarantee, notice of nonpayment and notice of protest. This guarantee is absolute and continuing and shall not be impaired if **Bailey Enterprises, Inc.** amends, renews, impairs, or releases any of the obligations contained in its terms.

I further understand that by signing this credit application, I am authorizing **Bailey Enterprises Inc.** to distribute information to our Company via fax and e-mail.

The following must be signed by owner or corporate officer.

_____	_____	_____	_____
AUTHORIZED SIGNATURE	PRINTED NAME	TITLE	DATE
_____	_____	_____	_____
AUTHORIZED SIGNATURE	PRINTED NAME	TITLE	DATE



ACH CORPORATE CREDIT AUTHORIZATION

I (we) hereby authorize **BAILEY ENTERPRISES, INC** to initiate credit entries to my business account at the financial institution listed below for goods and/or services. I (we) acknowledge that the origination of ACH transactions to the bank account listed below must comply with the provisions of U.S. law. I further authorize adjusting entries (reversals) to correct errors, if any.

Company Name on Account _____

Address, City, St, Zip _____

Telephone Number _____

Bank Name _____

Bank Address, City, ST, Zip _____

Bank Contact Person _____

Bank Telephone Number _____

Bank Routing # _____ Bank Account # _____

PLEASE ATTACH VOIDED CHECK

I Certify that the information provided is correct and I am an authorized representative of the Company indicated above and that I have the authority to enter into this Agreement on the Company's behalf. Company understands this authorization will remain in effect until it is canceled in writing, and agrees to notify **BAILEY ENTERPRISES, INC** in writing at least 30 days in advance of any changes in ins account information or termination of this authorization.

Signature _____

Printed Name _____

Title _____

Date _____

