

BURKE PETROLEUM, INC.

315 W. First St., P.O. Box 7,
Minster, Ohio 45865

419-628-3097 phone
419-628-4203 fax

Legal Name of Company or Full Legal Name _____

Spouses Legal Name _____

DBA: _____

Address (Physical) _____

Address (Mailing) _____

Telephone Number _____

Fax Number _____

Federal ID/Social Security # _____

Spouses Social Security # _____

Date of Birth: _____ **Spouses Date of Birth** _____

E-Mail Address _____

Type of Business **Corporation** _____ **Partnership** _____ **LLC** _____

Sole Proprietor _____

Number of Years in Business _____

OWNERS OR OFFICES OF BUSINESS

NAME _____ **PERSONAL ADDRESS** _____

SOCIAL SECURITY NUMBER _____

HOME PHONE NUMBER _____ **POSITION WITH COMPANTY** _____

OWNERS OR OFFICES OF BUSINESS

NAME _____ **PERSONAL ADDRESS** _____

SOCIAL SECURITY NUMBER _____

HOME PHONE NUMBER _____ **POSITION WITH COMPANTY** _____

OWNERS OR OFFICES OF BUSINESS

NAME

PERSONAL ADDRESS

SOCIAL SECURITY NUMBER

HOME PHONE NUMBER

POSITION WITH COMPANTY

OWNERS OR OFFICES OF BUSINESS

NAME

PERSONAL ADDRESS

SOCIAL SECURITY NUMBER

HOME PHONE NUMBER

POSITION WITH COMPANTY

PERSONAL INFORMATION

NAME OF EMPLOYER _____

ADDRESS OF EMPLOYER _____

PHONE NUMBER _____

LENGTH OF EMPLOYEMENT _____

SPOUSES EMPLOYER _____

ADDRESS OF EMPLOYER _____

PHONE NUMBER _____

LENGTH OF EMPLOYEMENT _____

BANK REFERANCES

NAME OF BANK _____

ADDRESS _____

ACCOUNT # _____

TELEPHONE # _____

FAX # _____

CREDIT REFERANCES

3 REQUIRED MUST BE WITH VENDORS WITH OPEN ACCOUNTS

NAME _____
ADDRESS _____
PHONE NUMBER _____ FAX NUMBER _____
RECENT HIGH CREDIT _____ CONTACT _____

NAME _____
ADDRESS _____
PHONE NUMBER _____ FAX NUMBER _____
RECENT HIGH CREDIT _____ CONTACT _____

NAME _____
ADDRESS _____
PHONE NUMBER _____ FAX NUMBER _____
RECENT HIGH CREDIT _____ CONTACT _____

NAME _____
ADDRESS _____
PHONE NUMBER _____ FAX NUMBER _____
RECENT HIGH CREDIT _____ CONTACT _____

By signing below We/I agree to the following terms. All invoices are due net 30 days from date of invoice. Any payments received after the 30 day term will be subject to 1.5% finance charge per month. Any checks returned for NSF will be subject to a separate NSF charge. I/WE agree that by signing below we are signing both corporately and personally for all charges incurred with Burke Petroleum, Inc.

****THIS APPLICATION MUST BE SIGNED BY OWNER OR (2) OFFICERS OF COMPANY**

PRINT NAME

PRINT NAME

SIGNATURE

SIGNATURE

TITLE OR POSITION

TITLE OR POSITION

DATE

DATE

BURKE PETROLEUM, INC.

Type of Credit Agreement:	30days
Tank Wagon Fuel:	30days
Transport Fuel:	7 days
Lubes	30days

Governing Law;

All disputes between the parties hereto and/or arising as a result of with respect to these terms of sale will be governed and settled by the laws of the State of Ohio. The customer agrees that proper jurisdiction and venue shall rest exclusively with-in the courts of the State of Ohio. The Undersigned expressly agrees to make payment in full for all purchases in accordance with Burke Petroleum, Inc. terms. A service charge of 1.5 percent per month or portion of thereof will be charged on all past due invoices. The undersigned further agrees to pay reasonable attorney fees and costs incurred by Burke Petroleum, Inc. in the collection of any past due obligations of the undersigned pursuant hereto.

The Undersigned, as a inducement to grant credit, warrant that the information is true and correct. As part of the application for credit, the applicant grants permission to contact consumer credit reporting agencies, commercial credit reporting agencies, and any or all trade and bank references listed above, together with any other references which may be provided by these trade or bank references.

SIGNATURE OF PRICIPAL OFFICER/OWNER

TITLE

Note: A signature of a principal or an officer is necessary before credit can be extended. Financial Statements may be requested by Burke Petroleum, Inc.

Personal Guarantee:

In consideration of credit being extended by Burke Petroleum, Inc., to the above named applicant for merchandise purchased whether applicant be an individual, a proprietorship, a partnership, a corporation, a LLC, or other entity, the undersigned guarantor(s) each hereby contract and guarantee Burke Petroleum Inc., the faithful payment when due of all accounts of said applicant for purchases made after the date of this application. The undersigned guarantor(s) each hereby expressly waive all notice of acceptance of the guarantee, notice of extension of credit to applicant, presentment and demand for payment on applicant, protest and notice to undersigned guarantor(s) of dishonor or default by applicant or with respect to any security held by Burke Petroleum Inc., extension of time of payment to applicant, acceptance to partial payment or partial compromise, all other notices to which the undersigned guarantor(s) might otherwise be entitled and demand for payment under this guarantee. Any revocation of this guarantee shall be in writing and delivered to Burke Petroleum Inc. P.O. Box 7, 315 W. First St. Minster Ohio 45865.

GUARANTOR (S) PRINT NAME

WITNESS

GUARANTOR (S) PRINT NAME

WITNESS

IF YOUR ACCOUNT IS FOR RESALE OR OTHER TAX EXEMPT PURPOSES PLEASE PROVIDE A SIGNED COPY OF YOUR ANNUAL RESALE CERTIFICATE AND ANY OTHER TAX EXEMPTION CERTIFICATE.

INTERNAL OFFICE USE ONLY:

NEW CUSTOMER STATUS _____

CREDIT APPROVED _____

CREDIT DENIED _____

TERMS _____

APPLICANT _____

ACCOUNT # _____