

Customer Information

Correspondence in English French

Legal Name _____

Address _____

City _____ Prov. _____

Postal Code _____ Telephone: _____

Fax #: _____ E-mail address: _____

Doing Business As (Trade Name) _____

Business Relationship: Proprietorship Partnership Corporation

Company Officers Name _____ Title _____

 Name _____ Title _____

Contact Names Purchasing _____ Accts Payable _____

For Personal Credit check only SIN # _____

Industry/business description _____

Credit References

Bank Fax # Address Acct# Contact

Trade references from whom customer is buying on credit, including last petroleum supplier, (name, address, contact and fax number)

1) _____

2) _____

3) _____

Product Information

Est. Annual Usage (kL) Diesel Mogas Lubes Other

Credit Information If credit requirement is greater than \$50,000, please supply copy of most recent year end financials.

Credit Limit Required: Estimated highest 2 month purchases: \$ _____ \$ _____

Payment Options*: I will pay my account by statement, due the 25th day of the month following delivery/purchases.

(Please check one) I will pay my bill by invoice, due 30 days from the date of the delivery/purchase.

If a Crown Corporation Please send proof of Government ownership to credit department within 30 days.

Tax Exempt Status: Details _____ Exemption licence # (attach copies) _____

Authorization

By signing this credit application, I agree that Imperial Oil/Esso Branded Fuels (The company) may, from time to time give any credit and other information, including any information on this application to, or receive such information from any (a) credit bureau or reporting agency; and (b) person in connection with any dealings I have or propose to have with the Company, or the Company's authorized representative. I further agree that the Company may use that information to establish and maintain a relationship between the Company and me and to offer me any service as permitted by law.

Customer Signature _____ Date _____

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