

Thank you for your interest in establishing a business credit account with Lazer Energy Company Inc. Our goal is to have applications processed within 3 business days assuming all Trade References respond quickly. If approved for an account, it may take longer to have your account opened. If there is missing information, we will not be able to proceed with your application. By ensuring all this information is provided we will be able to service you sooner.

Type of Account Requested (Check one & fill out the corresponding sections listed for each option)

□ Cash, Check, Credit Customer Account (Section 1-3)

□ Line of Credit Account (Section 1-5)

Section 1^(All Applicants)

Company Information

Company Name			DBA				
Physical Address		City			State	Zip Code	
Billing Address		City			State	Zip Code	
Main Phone	Main Fax		Main	Email		Website	
Type of Business	Fed ID			Sales Tax Exempt ID (pl	ease attach)	Fuel Tax Exempt ID (DD#)	
Year Established	I Nature Of Business □Sole Proprietorsh	iip 🗆	Corpor	I ation □Partnershi	ip □LLC	□Other, describe:	

Contact Information

A/P Contact Name	Contact Fax
Contact Email	Contact Fax
	contact tax
Method of Invoicing Preferred?	
🗆 Mail 🛛 🗆 Fax 🔅 Email	

Parent Company Information

Company Name	DBA				
Physical Address	City		State	Zip Code	

Previous Company Information (only if needed if in business less than a year)

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Company Name		DBA		
Physical Address	City		Physical Address	City

Section 2^(All Applicants)

Owner(s) Information

Please list all Principle Owner(s) and/or Officers

Name	Title	Address
Name	Title	Address
Name	Title	Address

Section $3^{(AII Applicants)}$

Customer Terms

Parties hereby agree that all purchases made are subject to the following terms and conditions:

I understand that:

1. All account balances are payable to Lazer Energy Company Inc.

2. The Undersigned agrees to notify Lazer Energy Company Inc. by certified mail of any pending change of ownership of the Customer and further agrees to be liable for all purchases should the undersigned fail to comply with said notification.

3. The applicant also agrees to pay interest on past balances at a rate not to exceed the applicable state legal maximum or 1½ % per month, whichever is less if such interest is charged. The applicant agrees to pay all collection costs, court costs and legal fees to collect delinquent balances. Furthermore, the applicant agrees to pay the maximum charge allowed for any returned checks.

I declare, under penalty of perjury, that the information on this application is correct. A faxed signed copy shall be treated as an original.

Name of Authorized Representative: _____

Signature: _____

Date: _____

Section 4^(Line of Credit Applicants)

Bank Reference

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Спескіпg						
Bank Name			Acct. #			
Physical Address		City		State		Zip Code
Contact Name	Phone		Fax		Email	

Loans

Bank Name				Acct. #			
Physical Address		City		State		Zip Code	
Contact Name	Phone		Fax		Email		

Section 5^(Line of Credit Applicants)

Credit References

Reference 2	1
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Company Name				A/P Contact			
Mailing Address		City	State		Zip Code		
Phone	Fax			Email			

Reference 2

Company Name			A/P Contact			
	City	State		Zip Code		
Fax			Email			
F		City	City State	City State		

Reference 3

Company Name				A/P Contact			
Physical Address		City	State Zip		Zip Code		
Phone	Fax			Email			

Reference 4

Company Name A			A/P Contact				
Physical Address		City	State		Zip Code		
Phone	Fax			Email			

Have you ever been involved in any personal or business bankruptcies at any time? If so, please provide details:

Have you ever or are you now doing business under any other name? If so, state name:

In consideration of Lazer Energy Co., Inc. Extending credit to the above listing company, I hereby promise to pay for any merchandise ordered by said company or any of its agents, representatives or employees from Lazer Energy Co., Inc. within (30) days after receiving such merchandise. If said company does not pay for merchandise. It is understood that this is a personal and individual guarantee on my behalf.