

JASPER OIL COMPANY

PO BOX 2290 * JASPER TX 75951 * (Tel) 409-383-0555 * (Fax) 409-383-0035 * jasperoilco@gmail.com

COMPANY CREDIT AGREEMENT AND APPLICATION

The following information is submitted for your consideration as a basis for the extension of credit to us:

- Individual Credit: Applying for credit in your own name and relying on your own income or assets of another person as the basis for repayment of the credit requested.
- Joint Credit: Applying for joint credit with partner or partners. Each co-applicant must complete a separate statement.
- Corporate: The president of the Corporation is to complete and sign this application on behalf of the Corporation. Individual Guarantor(s) required.

Name of Applicant _____

Name of Corporation (if applicable) & Address _____

Taxpayer ID Number _____ Entity's State of Organization _____

Registered Agent & Address _____

Name of Partnership (if applicable) & Address _____

Business Name _____

Street Address _____

Mailing Address _____

City, State, Zip _____

Business Phone Number _____ Business Fax Number _____

Person to contact regarding Accounts Payable _____ Phone _____

PLEASE COMPLETE IF APPLYING AS INDIVIDUAL OR JOINT CREDIT/OR CORPORATE GUARANTOR

Present Home Address _____
(Number & Street) (City) (State) (Zip)

Home Phone _____ Date of Birth _____

Social Security Number _____ Driver's License Number & State _____

Name of Bank _____

Mailing Address _____
(Number & Street) (City) (State) (Zip)

Checking Account Number _____

Please provide the name of a bank official who can serve as a reference.

(Name)

(Title)

(Phone)

BUSINESS OR TRADE REFERENCES

Name of Creditor _____
Mailing Address _____

Telephone Number _____
Fax Number _____
Account Number _____
Account Balance \$ _____

Name of Creditor _____
Mailing Address _____

Telephone Number _____
Fax Number _____
Account Number _____
Account Balance \$ _____

Name of Creditor _____
Mailing Address _____

Telephone Number _____
Fax Number _____
Account Number _____
Account Balance \$ _____

Name of Creditor _____
Mailing Address _____

Telephone Number _____
Fax Number _____
Account Number _____
Account Balance \$ _____

The undersigned customer submits this application to Jasper Oil Company with its request that said company extend credit for purchases of Fuel related products. Customer certifies the above information is complete and accurate and authorizes said company to investigate customer's credit history and authorizes and requests its creditors to release information to Jasper Oil Company concerning credit experience with customer. Jasper Oil Company is authorized to release information concerning credit experience with customer. If said account is placed in the hands of an attorney for collection, customer agrees to pay company's reasonable attorney's fees and court costs. Customer further covenants and agrees that payments for goods are due and payable in Jasper County, Texas and that this agreement is performable in Jasper, Texas, where as a result, venue will lie for any action brought for collection of Customer's account. THIS AGREEMENT SHALL BE GOVERNED BY AND CONSTRUED IN ACCORDANCE WITH THE LAWS OF THE STATE OF TEXAS.

X _____
SIGNATURE OF APPLICANT/CUSTOMER DATE

PERSONAL GUARANTEE

In consideration of Jasper Oil Company's agreement to supply goods to applicant/customer on account, the undersigned, jointly and severally, unconditionally guarantee and promise to pay Jasper Oil Company at Jasper County, Texas any and all indebtedness now existing and as may be hereinafter incurred by applicant/customer to Jasper Oil Company whether evidenced by an open account, promissory note, or otherwise.

X _____
PERSONALLY GUARANTEED DATE

FOR COMPANY USE ONLY:

Credit Approved Yes No Terms _____

Credit Manager – Jasper Oil Company

Date