



SCOTT PETROLEUM CORPORATION

102 MAIN STREET - ITTA BENA, MS 38941 - WWW.SCOTTPETROLEUMINC.COM

SERVING YOU SINCE 1935



ALL Information Must Be Completed COMMERCIAL CREDIT APPLICATION

TYPE OF ACCOUNT: Corporation <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership: General <input type="checkbox"/> Limited <input type="checkbox"/>			
NAME OF ENTITY: <u>Madison County Board of Supervisors</u>		PHONE #: <u>601-855-5500</u>	
PRIMARY CONTACT: <u>Danny Lee - Building & Grounds</u>			
ADDRESS: <u>125 West North Street</u>		CITY: <u>Canton</u>	STATE: <u>MS</u> ZIP: <u>39046</u>
S.S. / FED ID: <u>64-6000658</u>		YEARS IN BUSINESS: <u>100+</u>	
TYPE OF PRODUCTS: <u>LPGAS / PROPANE</u>			
CREDIT LIMIT REQUESTED: _____ ARE YOU BONDED? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, PLEASE LIST BOND #: _____			
COMMERCIAL BANK	CITY / STATE	PHONE NUMBER	CONTACT
<u>Remasant</u>	<u>Tupelo, MS</u>	<u>662-324-0506</u>	<u>Beth Bland</u>
PRODUCTION LENDER	CITY / STATE	PHONE NUMBER	CONTACT
PRIMARY SUPPLIERS	CITY / STATE	PHONE NUMBER	CONTACT
IN THE LAST 10 YEARS, HAVE YOU BEEN IN BANKRUPTCY OR HAD ANY JUDGMENTS FILED AGAINST YOU? YES <input type="checkbox"/> NO <input type="checkbox"/>			
IF YES, PLEASE EXPLAIN ON BACK.			

1. This application and any support information is the property of Scott Petroleum.
2. Scott Petroleum is authorized to make credit checks or inquiries concerning references of credit on this application. Creditors and depositories listed on any financial statement provided are specifically authorized to verify such balances and repayment schedule thereof.
3. Payment terms are as follows: Balance due in full 30 days. In event of default in payment of this account when due, and this account is placed in the hands of an attorney for collection, the undersigned agrees to pay reasonable attorney's fees and all costs of collection. Demand, protest, and notice of demand, protest and non payment are hereby waived. A late charge of 1.75% per month or the maximum rate allowed in the customer's state, whichever is less will be added on past due balances.
4. We acknowledge and agree that the amounts due on our regular billing statements are correct and owed by the undersigned and no further evidence of debt is required on behalf of Scott Petroleum. Any discrepancies are to be reported within ten (10) days of statement issuance. This agreement applies to all existing and future account balances.
5. If this applicant is a corporation or limited partnership, I (we) the undersigned understand and agree that I (we) am personally responsible for such debt.
6. Photocopies and facsimiles of this portion of the application may be presented to and relied upon by my (our) creditors and others as evidence of authorization to release information to Scott Petroleum.
7. The undersigned specifically authorize telephone purchases of products by its representative without further documentation or confirmation by Scott Petroleum Corporation.
8. Application for credit may be taken and approved by phone, provided said application is executed by the applicant within seven (7) working days. Should the application not be executed within said period, Scott Petroleum Corporation may declare any amounts extended fully due and payable and in default.
I (we) warrant that the information provided on this application is, to the best of my (our) knowledge, true, correct, and complete. The additional information provided is also a complete and accurate presentation and may be relied upon by Scott Petroleum in their decision making process.
9. The maker(s) of this application grant(s) Scott Petroleum Corporation express permission to run periodic credit checks at its discretion if default occurs in the payment of any installment as outlined above. In the event of default in the payment of this note, and if the same is collected by an attorney at law, the undersigned agree(s) to pay all costs of collection including a reasonable attorney's fee.
10. The maker(s) of this application consent(s) to the exclusive personal jurisdiction and venue of the County Court or Circuit Court of Leflore County, Mississippi and expressly waive(s) any or all rights to have any cause of controversy related in any way to this agreement or the performance thereof brought in any other court.

DATE _____

APPLICANT _____

SIGNATURE _____

COSIGNER / GUARANTOR
(REQUIRED ON CORPORATIONS & LIMITED PARTNERSHIPS)

WITNESS _____

100-100000

Medical County Board of Supervisors
County of San Diego

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