

**CREDIT APPLICATION**

Sales Rep: \_\_\_\_\_ Rep #: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Direct: \_\_\_\_\_  
 Cell: \_\_\_\_\_

**Applicant Contact and Business Information**

Business Name: \_\_\_\_\_  
 Other Trade Name: \_\_\_\_\_ Web Address: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Business Address: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Parent Company or  
 Headquarter Address: \_\_\_\_\_  
 Dun & Bradstreet #: \_\_\_\_\_ Years in Business: \_\_\_\_\_

Corporation (Privately Held)     Corporation (Publicly Traded)...Symbol \_\_\_\_\_  
 Partnership     Sole Proprietor     Federal, State or Local Gov't.  
 Federal ID # \_\_\_\_\_ (Corporation or Government)    Social Security # \_\_\_\_\_ (All Others)

**Principle Officers, Partners, or Individual Proprietor: (Attach additional page if necessary)**

Corporate Officer: \_\_\_\_\_ Title: \_\_\_\_\_  
 Corporate Officer: \_\_\_\_\_ Title: \_\_\_\_\_  
 Corporate Officer: \_\_\_\_\_ Title: \_\_\_\_\_

**Bank References**

Bank Name: \_\_\_\_\_ Bank Name: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Account #: \_\_\_\_\_ Account #: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Email: \_\_\_\_\_ Email: \_\_\_\_\_  
 Fax #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**Trade / Credit References (Please list your larger suppliers/vendors)**

Reference Name	Phone	E-mail	Account #
1.			
2.			
3.			
4.			
5.			
6.			

I certify that I am authorized to make this request on behalf of this company. I understand the payment terms of Sun Coast Resources, Inc. are EFT 10 and agree to pay all purchases according to these terms. I further agree this application is the property of Sun Coast Resources, Inc., and authorize Sun Coast Resources, Inc. to investigate credit and financial information through any credit bureau or by any other reasonable means including direct contact with past and present creditors and banking institutions.

Signed This \_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_.  
 Authorized Signature \_\_\_\_\_ Title: \_\_\_\_\_  
 Printed Name \_\_\_\_\_ Valid Drivers License # and State: \_\_\_\_\_  
 (Disregard for Corporations and Governments)

*It is Sun Coast policy that all past due accounts are subject to a finance charge that is the highest allowed by State Law, plus reasonable attorney's fees and costs of suit if the past due account(s) are placed for collection. All Venue is to be Harris County, Texas.*

**FOR OFFICE USE ONLY**

Order Pending:  No  Yes    Date: \_\_\_\_\_ Pending Order Amount: \_\_\_\_\_ Requested Credit Line: \_\_\_\_\_  
 SCRI Tank:  No  Yes    Size: \_\_\_\_\_ SCRI Pan:  No  Yes    Other Equip \_\_\_\_\_



1985-2020

**ACCOUNT SET-UP INFORMATION**

Sales Rep: \_\_\_\_\_ Rep #: \_\_\_\_\_

Email: \_\_\_\_\_

Direct: \_\_\_\_\_

Cell: \_\_\_\_\_

**Billing and Shipping Information**

Business Name: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Accounts Payable Email: \_\_\_\_\_

Email Address for product updates and compliance information: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

Indicate Invoice Delivery Method (Email is our preferred method):  
 Email Email Address: \_\_\_\_\_  
 Mail ATTN Line: \_\_\_\_\_  
 Fax Fax # and ATTN: \_\_\_\_\_

Ship-to Location Name (if different): \_\_\_\_\_

Ship To Address: \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Is the ship to address inside or outside city limits?  Inside City Limits  Outside City Limits

Ship To Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Driving Directions: \_\_\_\_\_

Receiving Hours: \_\_\_\_\_

Special Unloading Requirements: \_\_\_\_\_

**Purchasing Information**

**CHECK** products that will be ordered and **LIST** applicable tank sizes for each as these will be the products listed on your account.

	Tank Size	Monthly Volume		Tank Size	Monthly Volume
<input type="checkbox"/> Unleaded	_____	_____	<input type="checkbox"/> <b>DYED</b> USLD	_____	_____
<input type="checkbox"/> Midgrade	_____	_____	<input type="checkbox"/> ULSD	_____	_____
<input type="checkbox"/> Super	_____	_____	<input type="checkbox"/> DEF	_____	_____
<input type="checkbox"/> Other <small>Select a Product</small>	_____	_____	<input type="checkbox"/> Oil/Lubes - Packaged	_____	_____
<input type="checkbox"/> Oil/Lubes - Bulk	_____	_____			

**Tax Information**

Sales Tax Oils & Lubricants  N/A  Yes  No If no, a resale or exemption certificate must be attached  
 Sales Tax Parts & Equipment  N/A  Yes  No If no, a resale or exemption certificate must be attached  
 Sales Tax Services  N/A  Yes  No If no, a resale or exemption certificate must be attached  
 Sales Tax Fuel (N/A in Texas)  N/A  Yes  No If no, a resale or exemption certificate must be attached  
 State Tax  Yes  No If no, applicable permit must be attached  
 Federal Tax  Yes  No If no, applicable permit must be attached (N/A on dyed diesel)  
 Above Ground Tanks  Yes  No  
 Destination for Product  Tank  Train  Boat  Generator  Other \_\_\_\_\_

**FOR OFFICE USE ONLY**

Please Check the Following:

Bobtail  Transport  Reseller  End User  \*\* Monitor Customer  \*\* Price Doc Customer

Market Segment:  Mainstream  Lubes  Frac  Generator  Railroad  Fleet Fueling  
 Emergency  FOB

Industry: (Check One)  Transportation  Rail  Drilling  Generator  Agriculture  Marine  
 Construction  Retail  Industrial  Aviation  Government  Service  
 Emergency  Frac  Wholesaler