



**800-548-6671      936-825-6868**  
**936-870-3355 Fax**

Gasoline & Diesel Fuel  
 Automotive & Industrial Lubricants  
 Bulk & Packaged Products

Business Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Fed ID #: \_\_\_\_\_  
 Phone #: \_\_\_\_\_  
 Fax #: \_\_\_\_\_

Type of Business \_\_\_\_\_ Years in business \_\_\_\_\_  
 Own Building? Own \_\_\_\_\_ Rent \_\_\_\_\_ Landlord \_\_\_\_\_

Phone #: \_\_\_\_\_

Sales Tax Exempt Yes \_\_\_\_\_ No \_\_\_\_\_ Sales Tax Exemption # \_\_\_\_\_

Purchase Order  
 Required?  
 Yes \_\_\_\_\_ No \_\_\_\_\_

Accounts Payable Contact \_\_\_\_\_ Title \_\_\_\_\_  
 Phone # \_\_\_\_\_ Ext. \_\_\_\_\_

Bills Paid By:  
 Invoice \_\_\_\_\_ Statement \_\_\_\_\_

Principal's Name \_\_\_\_\_  
 Residence Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

S.S.# \_\_\_\_\_

**BANK REFERENCES**

Bank Name \_\_\_\_\_  
 Bank Address \_\_\_\_\_

Checking Acct # \_\_\_\_\_  
 Savings Acct # \_\_\_\_\_

We authorize you to release information concerning the noted account(s) with your bank/company to Kolkhorst Petroleum for the purpose of credit verification.

In the event credit is extended, the undersigned agrees (1) To pay for all purchases pursuant to terms of the Seller's invoice, (2) To pay seller a delinquency charge of no less than 18% per annum with a \$5 minimum charge on any amount remaining unpaid 30 days after date of invoice, (3) To pay seller's reasonable attorney's fees and cost incurred in connection with enforcing any obligation of the undersigned, (4) To pay all sums due to Seller at its address in Grimes County, Texas which shall be the venue for any suit brought by either party

Signature \_\_\_\_\_  
 Signature \_\_\_\_\_

Date \_\_\_\_\_  
 Date \_\_\_\_\_

**CREDIT REFERENCES**

Name \_\_\_\_\_  
 Address \_\_\_\_\_

Phone # \_\_\_\_\_  
 Fax # \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_

Phone # \_\_\_\_\_  
 Fax # \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_

Phone # \_\_\_\_\_  
 Fax # \_\_\_\_\_

**CUSTOMER SURVEY - PLEASE COMPLETE**

How did you hear about Kolkhorst Petroleum? \_\_\_\_\_

For Kolkhorst Petroleum Use

Salesperson's Initials: \_\_\_\_\_ Notes: \_\_\_\_\_  
 Salesperson's #: \_\_\_\_\_