



**CONFIDENTIAL COMMERCIAL CREDIT APPLICATION**

(Please complete all information. Missing information may delay processing.)

**ACCOUNT INFORMATION**

Company Name:			
Physical Address:			
Address Line 2:			
Mailing Address (if different from above):			
Address Line 2:			
Phone:	Fax:	Email:	
Company Contact:		Email:	
Accounts Payable Contact:		Email:	
Type/Area of Business:		Dun & Bradstreet #:	
Date Business Established:		Tax ID/Registration #:	
Sole Proprietorship:	Partnership:	Corporation:	LLC:
			OTHER:

**OFFICERS/PARTNERS/OWNERS INFORMATION**

Name:	Title:	Social Security #:
Address:		
Name:	Title:	Social Security #:
Address:		
Name:	Title:	Social Security #:
Address:		

**BANKING INFORMATION**

Bank Name:	Contact:
Bank Address:	
Phone:	Fax:
Account Type:	Checking A/C #:
	Savings A/C #:

**CREDIT REFERENCES**

(Please list 3 Trade References with established lines of credit. We reserve the right to contact references)

Company Name:	Contact:
Address:	
Address Line 2:	
Phone:	Fax:
	E-mail:
Company Name:	Contact:
Address:	
Address Line 2:	
Phone:	Fax:
	E-mail:
Company Name:	Contact:

2234 NORTH FEDERAL HWY #2019, BOCA RATON, FL 33431 USA

TEL: +1-305-925-9988

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Address:
Address Line 2:



Have you ever had or are there any judgements, attachments, or legal proceedings against you? Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Applications for credit will not be considered unless they contain the following:

- All fields completed on Credit Application Form
- Completed credit references (physical suppliers preferred)
- Recent company financial statements
- Recent credit report from a reputable credit agency (if available)
- Signed acknowledgement of Clipper Oil, Inc.'s Terms & Conditions

**CREDIT APPLICATION ACKNOWLEDGEMENT**

I/We declare that the information provided on this application is true and correct, and realize it will be relied upon in the granting of future credit by Clipper Oil, Inc ("Clipper Oil"). I/We understand that Clipper Oil reserves the right to request a new credit application, and corresponding documents, annually. I/We authorize Clipper Oil to make a credit investigation and if granted credit, I/we agree to pay all invoices within parameter of terms. My/Our financial condition is satisfactory, and I/we are currently paying debts generally as they mature. There are no outstanding judgments against the firm at the present time. It is agreed that a service charge of on-and-a-half percent (1 ½%) per thirty days (30) period compounded may be charged. Clipper Oil remains entitled to the reimbursement of any other damage/cost including but not limited to attorney fees, costs and expenses which may be incurred by Clipper Oil with respect to collection, legal or other actions necessary at any time in Clipper Oil's opinion for the protection of its interest and the enforcement of its rights hereunder. Notwithstanding that this account is established in the name of a company, I personally guarantee payment of the account. All purchases made on this account will be for commercial use.

Signature:	Title:
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Printed Name:	Date:
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Signature:	Title:
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Printed Name:	Date:
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**Authorization to Release Bank Information**

We authorize the bank to release information about our accounts, outstanding credit line and payment history to Clipper Oil to be used solely to establish an account, a credit line, and payment terms. This information is to be kept strictly confidential.

Authorized By:	Signature:
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