



MOTOR OIL - LUBRICANTS
www.deckmanoil.com

CONFIDENTIAL CREDIT APPLICATION

9 Norton Street * Honeoye Falls, New York 14472 * (585) 624-1630 * Fax (585) 624-2142

Company Name			Purchaser		
Mailing Address			City		State
					Zip Code
Delivery Address			City		State
					Zip Code
Email Address					
Phone		Fax	Years in Business & Type		<input type="checkbox"/> INDIVIDUAL OWNER <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION
S.S.# (non-incorporated)		Sales Tax Exempt#	Certificate Submitted Yes <input type="checkbox"/> No <input type="checkbox"/>		Estimated Credit Line \$

Credit terms are Net 30 for cash and check payment. Credit card payments will be processed at time of invoice. For those credit cards on file, we will be processing the credit card payment after delivery is made.

Please provide four complete Trade References. (suppliers, stores. Etc...)

Name		
Address		
City	State	Zip Code
Fax or E-mail		Contact

Name		
Address		
City	State	Zip Code
Fax or E-mail		Contact

Name		
Address		
City	State	Zip Code
Fax or E-mail		Contact

Name		
Address		
City	State	Zip Code
Fax or E-mail		Contact

Owner, Officer, Partner, Information

Last	Middle	First	Position
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Last	Middle	First	Position
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The undersigned hereby certifies that all statements are true and correct. I agree to the following terms:
 If this account is placed for collection, I agree to pay all collections costs and all reasonable attorney's fees,
 which are acknowledged to be no less than one-third (1/3) of the total amount due. Any suit for the balance due may be
 brought in any court in Monroe County, State of New York and we agree to accept service of the complaint by certified mail.

The undersigned authorize any credit investigation needed for action on this credit application.

Date _____ 20____ Buyers Signature _____