



ORANGE COAST PETROLEUM EQUIPMENT, INC.

1015 NORTH PARKER STREET; ORANGE, CA. 92867

PHONE: (714) 744-4049 / FAX: (714) 744-0638

APPLICATION FOR CREDIT

Please Fill Out Completely. Mail or Fax Completed Application to Our Credit Department.

BUSINESS INFORMATION:

LEGAL NAME: _____

DBA/TRADE NAME: _____ Fed ID #: _____

PHONE: () _____ FAX: () _____

SHIP TO ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

MAILING ADDRESS (If Different From Above): _____

CITY: _____ STATE: _____ ZIP CODE: _____

DATE BUSINESS STARTED: _____ RESALE NUMBER: _____

DO YOU BORROW ON YOUR ACCOUNTS RECEIVABLE? YES NO

HAVE YOU EVER FILED FOR BANKRUPTCY? YES NO

TYPE OF ORGANIZATION: INDIVIDUAL PARTNERSHIP CORPORATION

BANK INFORMATION:

BANK NAME: _____

BANK ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

REFERENCES:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: () _____ FAX: () _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: () _____ FAX: () _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: () _____ FAX: () _____

I (we) hereby certify that all statements in this application are true and complete and are made for the purpose of securing credit from you. If this application is approved, I (we) agree to pay for all labor and materials. You are hereby authorized to obtain any information you consider necessary from any source concerning the statements in this application. In the event it becomes necessary for your company to incur collection costs or institute suit to collect any amount due under this agreement, the undersigned promises to pay such additional costs and interests, including reasonable attorney's fees if the account is placed in the hands of an attorney for collection. You have the right to terminate this agreement and/or limit the amount of credit extended to me (us).

PRINT NAME: _____ TITLE: _____

SIGNATURE: _____ DATE: _____