



# Business Credit Application

Company Name			Phone#		Fax #
Billing Address			Shipping Address		
City	State	Zip	City	State	Zip Code
E-mail Address			Number of Locations		Years in Business
Ownership		Corporation	Partnership		Proprietorship
Name of Owner				Sales Tax #	
Name of Buyer				Federal Tax #	
Parent Company(If different than above)					

Address

## Bank References

Name	Phone #	Fax #
Account Number	Contact	

## Trade References

Company	Acct. #	Phone	
Address	City	State	Zip Code
Company	Acct. #	Phone	
Address	City	State	Zip Code
Company	Acct. #	Phone	
Address	City	State	Zip Code
Company	Acct. #	Phone	
Address	City	State	Zip Code

By signing below, I acknowledge that the information above is true and accurate and authorize Fast Track Lube Supply (FTLS) to obtain credit information from the references listed above, both presently and from time to time as needed. I also agree to be bound by the terms and conditions of FTLS and pay all invoices in accordance with terms allowed. I personally guarantee the payment of all monies due FTLS until this guarantee has been rescinded in writing. If needed due to failure of Customer to meet its obligations to FTLS, I agree to pay attorney and other collection fees incurred by FTLS in the enforcement of this application.

Payment Terms    Net 30 Days  
Discover/Mastercard/Visa

Late Payment Charge 1.5% Per Month (18% Annually)  
Service Charge of \$25.00 for Returned Checks

Authorized Signature ☐ Check this box to acknowledge this text field as your authorized signature

Date

Print Name

Title

Date Received \_\_\_\_\_ Date Approved \_\_\_\_\_ By \_\_\_\_\_ Acct # \_\_\_\_\_ TERMS/LIMIT \_\_\_\_\_



Sales Person