

# VELVIN OIL COMPANY, INC.

PETROLEUM DISTRIBUTOR

P.O. Box 993  
403 Webster Dr.  
Henderson, Tx. 75653

(903)657-2108

Fax (903)657-8794

OFFICE USE
APPROVED
DECLINED
DATE:

## INDIVIDUAL CREDIT APPLICATION

Name \_\_\_\_\_

Street Add \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Billing Add \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Employer \_\_\_\_\_ Employer Phone \_\_\_\_\_

Spouse Name (If Joint Account) \_\_\_\_\_ Soc Sec# \_\_\_\_\_

Spouse Employer \_\_\_\_\_ Employer Phone \_\_\_\_\_

Ever Filed Bankruptcy \_\_\_\_\_ if Yes/date Filed \_\_\_\_\_

Credit Requested \_\_\_\_\_ # Of Fuel Cards Requested \_\_\_\_\_

### CREDIT REFERENCES

Name	Address	Phone

### Bank Information

### TERMS AND CONDITIONS

**PAYMENT IS DUE UPON RECEIPT. BILLED ON THE FIRST OF EACH MONTH AND DUE UPON RECEIPT OF STATEMENT.**

I/We herein make application to establish and confirm our credit relationship with Velvin Oil Company, Inc. herein. The information supplied with this application is true and correct. If credit is granted, I/We agree individually and/or corporately to be liable for and pay all bills when rendered. We further agree that if this account is not paid by the close of Velvin Oil Co. billing cycle, a 1.5 percent (1.5%) per month late charge will be computed and added to the unpaid balance. If balance is not paid and Velvin Oil Co. deems it necessary to turn the account over to a COLLECTION SERVICE, we agree to pay an additional 25 percent (25%) of the amount due and owing. If Velvin Oil Co. and/or authorized COLLECTION SERVICE finds it necessary to refer this account to an ATTORNEY for initiation of a LAWSUIT, a fee of 33-1/3 percent (33-1/3%) of the outstanding balance plus any and all court costs shall be added to the account balance. We authorize Velvin Oil Company, Inc., or its agent to obtain credit information, verify and/or supply the information herein. **ALL INFORMATION WILL BE VERIFIED....**

Print Name \_\_\_\_\_

Sign Name \_\_\_\_\_ Date \_\_\_\_\_