

P. O. BOX 1115 PULASKI, TENNESSEE 38478 **CUSTOMER INFORMATION** 1-800-244-0340 e-mail address info@chilesoilpacpri.com



The Commercial Fueling System

DATE

SIC CODE

FAX 1-931-717-3862

	BUS	SINESS INFORMATION					
NAME OF BUSINESS		ADDRESS	ADDRESS				
СІТҮ		STATE	ZIP CODE	PHONE			
E-MAIL ADDRESS		WEBSITE		CELL PHONE			
ARE YOU PRESENTLY A PACIFIC PRIDE CARD HOLDER?		YES	NO	WHEN DID YOU LAST USE CARDS?			
BUSINESS LEGAL STRUCTURE		NAME AND A	DDRESS OF PARENT C	OMPANY			
YEARS IN BUSINESS	TYPE OF BUSINESS						
FEDERAL ID#							
NAME		Y PRINCIPALS RESPONSIBLE FOR BUSINESS TRANS SOCIAL SECURITY NUMBER		DATE OF BIRTH			
HOME ADDRESS	CITY	STATE		ZIP CODE			
HAVE YOU EVER FILED BANKRUPTCY?`	WHEN	WHERE		HOME PHONE			

BANK REFERENCES			
NAME OF BANK	NAME TO CONTACT		
BRANCH	ADDRESS		
CHECKING ACCOUNT NO.	TELEPHONE NUMBER		

TRADE REFERENCES					
FIRM NAMME	CONTACT NAME	TELEPHOME NUMBER	CITY AND STATE		

ANNUAL GALLONAGE ESTIMATE GALLONS OR DOLLARS	NUMBER OF VEHICLES		NUMBER OF DRIVERS	
PERSON TO CONTACT REGARDING ARRANGEMENTS OF CARDS			PHONE NUMBER	
The second se				
I authorize this organization to request a consumer and business credit report for purposes of determining my current and continued				
credit worthiness on this account now and in the future if needed. The permissible purpose(s) for which the report is being obtained				
certifies the report will not be used for any other	ourpose and will rer	nain confi	idential. I understand that this organization will be	
requesting a consumer credit and business report	requesting a consumer credit and business report in conjunction with this commercial business application. I release all such persons			
from any liability or damages that may be incurred as a result of such an inquiry or the furnishing of such information. I certify that			y or the furnishing of such information. I certify that	
the information on this application is true and complete, and that I am authorized as a signor to enter into this agreement. Additionally,				
I agree to all of the terms and items as outlined on page two of this application, for cardlock use.				
Printed Legal Name:		Title		
Signature		Date		

ADDITIONAL TERMS OF CARDLOCK USE

- 1) Purchases will be for vehicles owned and/or operated by the Purchaser for commercial use.
- 2) This access card is used to initiate a Pacific Pride or AmeriNet transaction to obtain fuel or other services offered through the cardlock system. This access card is <u>not</u> a credit card. By signing this application it is understood that the federal \$50.00 liability limit for credit cards will not apply to the Pacific Pride and/or Amerinet cardlock access cards issued on the account. All purchases will be the responsibility of the account holder/Purchaser. Please note that issuance of credit to the Purchaser is independent of the process for issuing a network access card.
- 3) In the event that any legal action is required to collect on this account, Supplier will determine venue for such legal matters, and the Purchaser/customer will cover all collection and/or legal costs or fees.
- 4) Purchaser shall be responsible for all purchases by Purchaser or any other persons using the cardlock cards issued to Purchaser, regardless of whether use by another person is authorized or is fraudulent. The Purchaser will immediately notify the Supplier of a lost, stolen or misused card, and when a card needs to be invalidated when an employee is terminated. The Purchaser agrees that they will <u>not</u> have the PIN#/security access code on/near the card should it be lost or become used fraudulently in anyway.
- 5) The Purchaser agrees to be responsible for any spills or fueling facility/equipment damage whether accidental or due to negligent use.
- 6) The Purchaser is advised that cardlock sites that are at/or near retail sites will not be paying the posted retail price at the site but the actual cardlock price per gallon. The posted price is for cash or credit card purchases only, and not the price of cardlock fueling purchases.
- 7) The Purchaser agrees that they have 30 days from their billing statement date to dispute any charge(s) noted within that statement.
- 8) If there is any change in the ownership of the Purchaser or if substantial assets of Purchaser are sold, the Purchaser shall promptly notify Supplier of such sale and Supplier shall have a lien on all the assets of Purchaser and a lien on the proceeds of such sale to secure payment of all outstanding sums owing to Supplier. If there are ownership changes made a new application will be filled out reflecting all current company ownership information by Purchaser.
- 9) Purchaser represents that it and any person using the cardlock cards delivered to Purchaser are and shall be aware of the proper use of the cardlock system and shall use safe practices in compliance with the regulations of the local Fire Code in the handling of the fuels dispensed from the cardlock system. The Purchaser agrees to indemnify and hold Supplier harmless from any claims and costs including, but not expressly limited to, those for bodily injury and property damage, which may be occasioned by the negligence of misuses of the cardlock system by the Purchaser of any person using the cardlock cards, delivered to the Purchaser hereunder.
- 10) Supplier shall use its best efforts to maintain the cardlock system in good working order and condition at its expense provided however Supplier shall not be responsible for any damage of loss which may result from its failure to provide fuel or the failure of the cardlock system in any manner whatsoever Purchaser agrees that it and any person using the cardlock cards delivered to the Purchaser shall promptly notify Supplier of any malfunctioning of the cardlock system of which Purchaser of such person is aware.
- 11) Purchaser's right to purchase fuel through the cardlock system may be terminated immediately upon any breach of any of the terms hereof or of any other agreement with Supplier. Upon termination, Purchaser agrees to immediately surrender all cardlock cards issued to Purchaser and to immediately pay all outstanding sums owing to Supplier. Supplier shall refund any deposit to Purchaser when all cards are returned and all amounts owing to Supplier are paid in full.
- 12) In the event of any breach of any of the terms of this agreement or any other agreement between Purchaser and Supplier, including but expressly not limited to the failure to pay sums owing to Supplier when due, then in addition to any other sums due or payable to Supplier by Purchaser, Purchaser agrees to pay the reasonable attorney fees and costs incurred by Supplier in the enforcement of Supplier's rights even though no suit or action is filed and if suit or action is filed to enforce the rights of Supplier then such further sum as the court may adjudge reasonable as attorney fees at trial or on appeal of such suit or action in addition to all other sums provided by law.
- 13) All terms and conditions of this Agreement and Guaranty are intended to cover Purchaser's account as well as all of Purchaser's other branch or regional accounts, whether set up now or in the future.

AGREEMENT AND GUARANTY

"I have made the attached statement for the purposes of obtaining credit. I certify they are true and authorize you to make a credit investigation. Billings shall be issued twice each month and payment will be due within 10 days of invoice date. I agree to pay a late charge of 1.5% per month (18% annual rate) or 50¢ minimum on any delinquent balances. THIS AGREEMENT INCLUDES THE TERMS AND CONDITIONS ON THIS APPLICATION HEREOF. Not withstanding that this account is established in the name of a company, I personally guarantee payment of this account. All purchases made on this account will be for commercial use. I agree to all of the terms as outlined above under the Additional Terms of Cardlock Use. In the event of my death, my heirs, executors and administrators shall be bound to this Guaranty until knowledge of such death shall come to the attention of the Credit Manager." Printed Legal Name: ________ Photo ID Given/ # / exp:

Signed Legal Name: _



DEBIT AUTHORIZATION

I (we) hereby authorize Chiles Enterprises, Inc., hereinafter called "COMPANY", to initiate electronic debit entries to my (our) account indicated below at the financial institution named below, hereinafter called "FINANCIAL INSTITUTION". I (we) acknowledge that ACH transactions I (we) authorize must comply with all applicable law.

Financial Institution

Financial Institution's Address

Routing Number

Account Number

Amount of debit(s) or method of determining amount of debit(s) [or specify range of acceptable dollar amounts authorized]: ______

(Note: For varying amounts the company must send, based on the *NACHA Operating Rules*, written notification of the amount and the date on or after which the transfer will be debited at least ten calendar days in advance of the debit. If the date varies, the *Rules* state that the Originator must send the Receiver notification of new date at least seven calendar days in advance of the debit.)

Date(s) and/or frequency of debit(s):

Type of Account: _____ Checking _____ Savings

This authorization is to remain in full force and effect until I (we) notify COMPANY in writing that I (we) wish to terminate this authorization in such time and manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Print or Type Individual Name

Signature

Date

Please Attach Copy of Voided Check to This Form!!!