



P.O. Box 70
East Montpelier, VT 05651
epackard@PackardFuels.com
802.262.FUEL (3835)

Commercial Credit Application

Business Name

Contact Name

EIN or SSN

Contact Number

Delivery Address

Mailing Address

Office Phone Number

Additional Contact Name&Number

Please provide credit references below:

1.

Name	Address	Phone Number
2.

Name	Address	Phone Number
3.

Name	Address	Phone Number

Terms:

In Consideration of Packard Fuels making Deliveries, I/we state that all of the above information is true, and I/we agree to abide by all of the following terms:

1. To pay for each delivery within 30 days if able to charge, or within your stipulated time on contract.
2. In the event I/we fail to comply with paragraph 1, to pay finance charge of 1.5% per month (18% per year) on all unpaid invoices
3. In the event of non-payment, to pay all costs of collection, including reasonable attorney fees.
4. Packard Fuels may check my/our credit with the above listed references, and/or with a credit reporting agency.
5. I agree that my electronic signature is legal equivalent of my manual signature on this agreement.

Applicant Signature

Date

Thank You!

Co-Applicant Signature

Date

For Office Use Only: Approved/Denied on: _____ By: _____