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| **BUSINESS CONTACT INFORMATION** | | | |
| Title |  | Date business commenced |  |
| Company name |  | * Sole proprietorship * Partnership * Corporation * Other | Comments: |
| Phone | Fax |  |
| E-mail |  |
| Registered company address City, State ZIP Code |  |
| **BUSINESS AND CREDIT INFORMATION** | | | |
| City, State ZIP Code |  | Bank name: |  |
| How long at current address? |  | Primary business address City, State ZIP Code |  |
| Phone |  | Phone |  |
| Fax |  | Account number |  |
| E-mail |  | Account Type |  |
| **BUSINESS/TRADE REFERENCES** | | | |
| Company name |  | Phone |  |
| Address |  | Fax |  |
| City, State ZIP Code |  | E-mail |  |
| Account Type |  | Other |  |
| Company name |  | Phone |  |
| Address |  | Fax |  |
| City, State ZIP Code |  | E-mail |  |
| Account Type |  | Other |  |
| Company name |  | Phone |  |
| Address |  | Fax |  |
| City, State ZIP Code |  | E-mail |  |
| Account Type |  | Other |  |
| **AGREEMENT** | | | |

1. All invoices must be paid no later than 21 days from the date of invoice.
2. Amounts past due by more than 30 days of invoice will incur a late fee of 1.5% for each month the balance remains unpaid.
3. If your account has not been paid for more than 90 days and no payment agreement has been arranged PSI may resort to legal means to collect payment. This may involve hiring a collection agency, an attorney, or going through small claims court. If such legal action becomes necessary you will be responsible for those costs.
4. Claims arising from invoices must be made within seven working days.
5. By submitting this application, you authorize PSI Petroleum Services, Inc. to make inquiries into the banking and business/trade references that you have supplied.

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| **SIGNATURES** | | | |
| Signature |  | Signature |  |
| Name |  | Name |  |
| Date |  | Date |  |