



Commercial Credit Application

445 State Street, North Haven, CT 06473
 Phone: 203-288-3518 | Fax: 203-248-2825
www.shorelinecompressedgas.com/

Company Information: Proprietorship* Partnership* Corporation LLC State of Incorporation: _____

Company name: _____ Phone: _____

DBA: _____ Fax: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Type of business: _____

Years in business: _____ Federal ID#: _____ No. Employees: _____

Anticipated high credit needed: _____ (Combined companies) Duns # _____

PRINCIPAL OR OFFICERS

Name	Title	Social Security#
_____	_____	_____
_____	_____	_____
_____	_____	_____

BANK REFERENCE

Bank name: _____ Account Officer: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

TRADE REFERENCES

Company	Contact Person	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

The above information is being provided in conjunction with a request of open credit terms. I hereby certify under penalty of perjury that the information provided is true to the best of my knowledge. The undersigned further understands that the Guaranty accompanying this application is necessary to extend credit to applicant. If this application is accepted, the undersigned agrees to the terms (Standard Terms used are Net 30 days and COD) and conditions of the application and changes from time to time. The undersigned further agrees that all issues and disputes relating to any credit arrangement extended hereunder shall be governed in accordance with the laws of the State of Massachusetts, without reference to conflicts of laws principles and to pay for all legal cost plus attorney's fees.

In accordance with the terms and conditions listed above, Applicant hereby authorizes to obtain commercial credit reports.

Date: _____ Principals or Officer: _____ Title: _____

SIGNATURE REQUIRED

GUARANTOR

ATTEST

By: _____

Signature: _____

Print Name: _____

Social Security Number: _____

Personal Address: _____

By: _____

Witness Signature: _____

Print Name: _____

THE FAIR CREDIT REPORTING ACT

Applicant acknowledges and agrees that we may utilize outside credit reporting services to obtain information on Applicant. In the event Applicant is/are individual(s), the signing of the Application shall constitute authorization under the Fair Credit and Reporting Act to utilize consumer credit reporting agencies to provide reports on said individual(s) in order to evaluate the extension of any business credit. This authorization will remain valid and enforceable until Applicant expressly revokes authorization in writing and served to us by registered or certified mail.

NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants based on race, color, religion, national origin, or sex. The federal agency that administers compliance with this law concerning this credit is the Federal Trade Commission, Division of Credit Practices, 6th and Pennsylvania Avenue, NW, Washington, D.C. 20580. If credit is denied, the applicant has the right to a written statement of the specific reasons for denial. To obtain the statement, please contact EnergyUSA Propane, Attn: Corporate Credit Department, 100 Myles Standish Blvd. Suite 101 Taunton, MA 02780, within sixty (60) days from the date you were notified of the decision to deny credit, we will send you a written statement of reasons for denial within thirty (30) days of receiving your request for the statement of reasons(s).

FOR COMPANY USE ONLY

New: _____ Resign: _____ Tank Size: _____ PPG: _____ Previous Account Name or Number: _____