

Date \_\_\_\_\_



**Fallbrook Oil Company**  
 Traut Petroleum, Inc.  
 1208 S. Main St. • Fallbrook, CA • 92028  
 (760) 728-7703 • (951) 676-3288 • (760) 728-1723 • Fax (760) 728-5110



**APPLICATION FOR CREDIT**

Company Name \_\_\_\_\_  Corporation  Partnership  Sole Proprietorship  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Billing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone ( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Business Home Cell  
 Fax ( ) \_\_\_\_\_ Email \_\_\_\_\_  
 Federal Tax ID #: \_\_\_\_\_ Board of Equalization # (CA only) \_\_\_\_\_  
 Date of Incorporation or Start Date \_\_\_\_\_ State of \_\_\_\_\_  
 Have you ever been a member of Pacific Pride?  No  Yes—How long ago? \_\_\_\_\_

**FULL NAME AND COMPLETE HOME ADDRESSES OF PRINCIPAL(S) OR OWNER(S) OF COMPANY**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Social Security -- -- Date of Birth / / Driver License# \_\_\_\_\_  
 Full Name of Spouse \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Social Security -- -- Date of Birth / / Driver License# \_\_\_\_\_  
 Full Name of Spouse \_\_\_\_\_

Have the principals of your business ever been involved in a Petition of Bankruptcy or Forced Liquidation?  No  Yes

**PERSON(S) AUTHORIZED TO SIGN FOR COMPANY (if more than two, please label & attach)**

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Name \_\_\_\_\_ Title \_\_\_\_\_  
 Contact Name & Title for Accounting Inquires \_\_\_\_\_

**ESTIMATED MONTHLY USE (in gallons)**

Clear Diesel \_\_\_\_\_ Red Diesel \_\_\_\_\_ Premium \_\_\_\_\_ Regular \_\_\_\_\_ Unleaded \_\_\_\_\_

**BANK REFERENCES**

Business Bank Name \_\_\_\_\_ Address \_\_\_\_\_  
 Deposit Account # \_\_\_\_\_ Contact Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

**TRADE REFERENCES**

Business Name \_\_\_\_\_ Contact Name \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Name \_\_\_\_\_ Contact Name \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Name \_\_\_\_\_ Contact Name \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

THE ABOVE INFORMATION IS SUBMITTED FOR THE PURPOSES OF OBTAINING CREDIT. THE UNDERSIGNED AUTHORIZES YOU TO MAKE SUCH INQUIRIES AS ARE NECESSARY TO OBTAIN CREDIT INFORMATION AND AUTHORIZES MY BANK, SUPPLIERS, AND CREDIT REFERENCES TO RELEASE INFORMATION REGARDING MY ACCOUNT(S). I/WE CERTIFY THAT EVERYTHING STATED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY/OUR KNOWLEDGE.

I/WE AGREE TO THE TERMS AND CONDITIONS SET FORTH ON THE CREDIT AGREEMENT (SEE REVERSE), INCLUDING THE TERMS OF REPAYMENT OF ATTORNEY'S FEES AND COSTS IN THE EVENT OF COLLECTION ON THIS ACCOUNT.

\_\_\_\_\_  
 SIGNATURE OF OWNER OR OFFICER \_\_\_\_\_ DATE \_\_\_\_\_  
 PRINTED NAME OF SAME \_\_\_\_\_ TITLE \_\_\_\_\_

