



1855 South Drive  
 P.O. Box 17 Natchitoches,  
 LA 71457 Sales@lotoil.com  
 www.lotoil.com

Please note  
 \* indicates  
 a required field

### Corporate Information

|   |                                    |
|---|------------------------------------|
| *Company Name: _____                                | *Social Security Number: _____     |
| *Billing Address: _____                             | If Incorporated, What State? _____ |
| _____   | Nature of Business: _____          |
| *Phone Number: _____                                | Years in Business: _____           |
| Fax Number: _____                                   | Website: _____                     |
| *Accounts Payable Contact: _____                    | *Federal ID: _____                 |
| *Accounts Payable Email: _____                      |                                    |
| If Contractor, Bonded?      Yes      No             | *Is this Company a:                |
|   | Corporation                        |
|   | Partnership                        |
|   | Sole Proprietor                    |
| Other Business Names You Have Operated Under: _____ | Limited Liability Company          |
| Dunn & Bradstreet: _____                            | Other                              |

#### \*Desired Credit:

|         |          |          |           |             |
|---------|----------|----------|-----------|-------------|
| \$1,000 | \$5,000  | \$20,000 | \$75,000  | \$150,000   |
| \$2,000 | \$10,000 | \$50,000 | \$100,000 | > \$200,000 |

#### \*Method of Payment:

Cash                                      Check                                      EFT                                      Credit Card  
 (Fee may apply on payments made by credit card)

#### Desired Terms:

COD                      Net 5                      Net 7                      Net 10                      Net 20                      Net 30

|   |   |
|---|---|
| <b>To be Filled out by Lott Oil Credit Department</b> | <b>Profit Center Responsible:</b>           |
| Master Account Number: _____                          | Alexandria                      Many        |
| Approved By: _____                                    | Bossier City                      Monroe    |
| Approved Terms: _____                                 | Leesville                      Natchitoches |
|   | Mansura                      Winnfield      |

### Personal Credit Information

Complete the following for all owners and partners

|   |   |
|---|---|
| *Name: _____  | Name: _____   |
| *Address: _____                                       | Address: _____  |
| _____   | _____   |
| *Phone Number: _____                                  | Phone Number: _____                                   |
| *Email Address: _____                                 | Email Address: _____                                  |
| _____   | _____   |
| *Social Security Number: _____                        | Social Security Number: _____                         |
| _____   | _____   |
| *Have you ever filed for bankruptcy?      Yes      No | *Have you ever filed for bankruptcy?      Yes      No |

## Personal Credit Information (Cont.)

Please complete following for all owners and partners

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_

\*Have you ever filed for bankruptcy?

Yes                      No

\*Have you ever filed for bankruptcy?

Yes                      No

## Banking, Insurance & Trade Information

\*Principal Bank: \_\_\_\_\_  
 \*Address: \_\_\_\_\_  
 Insurance Company: \_\_\_\_\_  
 Address: \_\_\_\_\_

\*Loan Officer: \_\_\_\_\_  
 \*Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Agent: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

\*Please provide the names and phone numbers of at least 3 credit references that we may contact. If approval needs expediting, please provide us with references that will give credit ratings over the phone to prevent delays.

\*Name: \_\_\_\_\_  
 \*Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 \*Name: \_\_\_\_\_  
 \*Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

\*Name: \_\_\_\_\_  
 \*Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 \*Name: \_\_\_\_\_  
 \*Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

## Shipping Information

\*Company Name: \_\_\_\_\_  
 \*Shipping Address: \_\_\_\_\_  
 \*Phone Number: \_\_\_\_\_

\*Same as Billing?                      Yes                      No  
 \*If shipping information is the same as billing, no additional information needed  
 On Site Contact: \_\_\_\_\_  
 On Site Email Address: \_\_\_\_\_  
 On Site Email/Cell: \_\_\_\_\_  
 \*PO Required?                      Yes                      No  
 Blanket PO: \_\_\_\_\_  
 \*Inside City Limits?                      Yes                      No

### To be completed by LOC Account Representative

### Products to be Purchased

| CONV. GAS                     | E10 GAS  | ON ROAD   | OFF ROAD                              | NONFL       |
|-------------------------------|----------|---|---------------------------------------|-------------|
| Provided By: Lott Oil Co.     | Customer | <b>Tank 1 Information</b>   | Type of Tank: Above Ground            | Underground |
| Product: _____                | _____    |   | Dimensions/Capacity: _____            | _____       |
| Provided By: Lott Oil Co.     | Customer | <b>Tank 2 Information</b>   | Type of Tank: Above Ground            | Underground |
| Product: _____                | _____    |   | Dimensions/Capacity: _____            | _____       |
| Provided By: Lott Oil Co.     | Customer | <b>Tank 3 Information</b>   | Type of Tank: Above Ground            | Underground |
| Product: _____                | _____    |   | Dimensions/Capacity: _____            | _____       |
| LOC Account Rep: _____        | _____    | <b>Freight</b>  | Freight Code: _____                   | _____       |
| Primary Terminal: _____       | _____    |   | Freight Code: _____                   | _____       |
| Secondary Terminal: _____     | _____    |   | Pump Off Required? _____              | _____       |
| Pricing Formula: _____        | _____    |   | Date Ship to Acct. Established: _____ | _____       |
| Ship to Account Number: _____ | _____    | *If additional shipping locations or tank info is required, please print additional sheet |                                       |             |

### Taxing Information

Tax Rate: \_\_\_\_\_ %                      Sales Tax Exempt?                      Yes                      No  
 Jurisdiction: \_\_\_\_\_                      Local Gov't Excise Tax Exempt?                      Yes                      No

If tax exemptions are applicable, supporting certificates must be supplied.

**TERMS AND CONDITIONS**

This application is submitted by the undersigned (hereinafter referred to as the **Applicant**) for the purpose of maintaining a credit account with Lott Oil Company, Inc. (hereinafter referred to as individually or collectively as **Creditor**). All representations are accurate, complete and truthful to the best of the Applicant's knowledge and belief. The Applicant hereby authorizes any individual, form or corporation given as credit references to disclose to the Creditor orally or in writing any information, which is pertinent to this application. If the Applicant is a corporation, partnership, or LLC (hereinafter Entity), the undersigned affirmatively states that he/she is authorized to make application on behalf of said Entity and to obligate the same for any credit extended thereto as a result of this application, and further that the Entity on whose behalf the application is hereby made will continue to be bound and obligated for any credit advanced hereto until notice to the contrary is given in writing via certified mail return receipt requested to the Creditor at 1855 South Drive, Natchitoches, LA 71457. Applicant authorizes Creditor to obtain a credit profile report from a credit agency. Credit extended by Creditor to Applicant shall be due within the terms stated on each invoice. Applicant agrees to pay the amount due on or before the due date to avoid a LATE CHARGE. All accounts not paid by the due date shall be deemed past due and a late charge shall be added to the past due balance. A FINANCE CHARGE of 1.5% per month (ANNUAL PERCENT RATE OF 18%) on the outstanding amount shall be charge on any amounts due to the Creditor that is not paid by the due date on any notice of amounts due from Applicant. It is expressly understood by Applicant that the existence of the FINANCE CHARGE does not affect Applicant's obligation to pay the account in full when due. At the election of the Creditor, Applicant may be required to remit payments via Electronic Funds Transfer (EFT). Upon Creditor's request, Applicant will submit all information necessary for processing transactions via EFT and execute any and all documents required for the payment via EFT. If this account is not paid in full when due it is placed in the hands of an attorney for collection. Applicant agrees to pay reasonable attorney's fees in the amount of at least twenty-five percent (25%) additional on the aggregate amount of principal, late charges, finance charges, all court costs incurred, and all collection expenses incurred. Applicant and Creditor agree that the exclusive venue for the litigation of any and all disputes that may arise from, be related to, or be connected with this agreement, or its terms and conditions, shall be in the district court of Natchitoches Parish, Louisiana, which shall likewise have exclusive jurisdiction of such disputes. Applicant and Creditor agree that Louisiana Law shall govern the interpretation of this agreement. Payments returned for any reason, will be subject to a return payment fee of \$30.00. Any references to Applicant herein also apply to any guarantors. Terms and Conditions can be changed at any time by Creditor with written notice.

**NOTICE: DO NOT SIGN THIS AGREEMENT UNTIL YOU HAVE READ IT. YOU ARE ENTITLED TO A COPY OF THE SIGNED AGREEMENT.**

|               |        |               |
|---------------|--------|---------------|
| _____         | _____  | _____         |
| *Signature    | *Title | *Witness      |
| _____         | _____  | _____         |
| *Printed Name |        | *Printed Name |

**GUARANTY**

For value received, the undersigned, who is made party to this contract and is bound with applicant jointly and in solido for the faithful execution of all obligations to be performed on the part of the Applicant, does hereby guarantee payment of all amounts advanced by Creditor to Applicant. Applicant and Guarantor specifically waive division.

|                           |                       |                            |
|---------------------------|-----------------------|----------------------------|
| _____                     | _____                 | _____                      |
| *Guarantor's Signature    | *Guarantor's SSN      | Guarantor's Principal Bank |
| _____                     | _____                 | _____                      |
| *Guarantor's Printed Name | Guarantor's Title     | *Witness Signature         |
| _____                     | _____                 | _____                      |
| Guarantor's Date of Birth | Guarantor Date Signed | *Witness Date Signed       |

\*Witness Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

