

ABBEVILLE: 337-893-2428
 DENHAM SPRINGS: 225-664-3311
 GUEYDAN: 337-536-6738
 JACKSON: 601-936-8922
 LAUREL: 601-425-4211
 NEW IBERIA: 337-365-8584
 PLAQUEMINE: 225-687-3610
 PURVIS: 601-794-6444
 SULPHUR: 337-558-7247



CREDIT APPLICATION

Salesman: _____
Date: _____

NOTICE: Fax completed credit application to (225) 664-3217 or email to sales@lardoil.com. Not completing this application entirely could result in a delay of approval for your account. Contact Inside Sales at (225) 664-3311 with any questions regarding credit application.

SECTION 1. BUSINESS INFORMATION (MUST BE COMPLETED BY SALESPERSON AND APPLICANT)

Purchaser/Business Name (If not registered with Secretary of State, insert owner's name)		Dun & Bradstreet #	Federal ID #	State co. formed
Business phone #	Business fax #	E-Mail address	Cell phone #	Yr. co. started
Street address (physical address)		City	State	Zip
Mailing address (billing address)		City	State	Zip
Fill in info for 10 items below with ★s for your ship-to. If more than one ship-to, attach Additional Ship to Form. Contact your salesman or our inside sales to obtain form.		★ Is this an underground tank? If not answered, UST fee will be charged Yes No		
★ Ship-to address (delivery address)		★ City	★ State	★ Zip
★ Ship-to contact name		★ Ship-to phone #	★ Ship-to fax #	Type of business:
★ Any special delivery/filling instructions:				Corporation Partnership Sole proprietor Other

SECTION 2: TAX INFORMATION (IF EXEMPT, ATTACH COMPLETED EXEMPTION CERTIFICATES FOR ANY THAT APPLY)

State sales tax exempt? Yes No	Parish/city sales tax exempt? Yes No	★ For any tax exempt ship-to, please attach both state and parish/city tax exemptions, as needed	Federal excise tax exempt? Yes No
Is business a non-taxable? Federal, state, local gov or education		Farmer	Contractor in construction federal contract

SECTION 3: ACCOUNT OPTIONS (MUST BE COMPLETED BY SALESPERSON AND APPLICANT)

Choose method of payment: Check Credit/Debit Card EFT (form attached)	Choose one: No purchase order needed Blanket PO # New purchase order for each order	Monthly Statements needed? Yes No	Do you want to receive invoice copies by: Fax #: _____ Mail Email: _____
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SECTION 4. LIST OF OFFICERS, PARTNERS, SOLE PROPRIETOR

Name & phone #	Title	Home address (City, state, zip)	Social security #	Date of birth

SECTION 5: PERSONNEL WE SHOULD KNOW:

Bookkeeper:	Purchasing agent:	Accounts payable:
Phone #	Phone #	Phone #
Fax #	Fax #	Fax #

Name (& phone #) who can contact if we have questions about credit application ?

SECTION 6: TRADE REFERENCES

	TRADE REFERENCES	BANK REFERENCE
TRADE 1	Name	Bank name
	Phone #	Fax #
TRADE 2	Name	Contact name
	Phone #	Phone #
TRADE 3	Name	Checking account #
	Phone #	Fax #

CREDIT APPLICATION - CONTINUED

SECTION 7. TERMS & CONDITIONS

The below named purchaser/business ("Purchaser") agrees that all purchases made by Purchaser from Lard Oil Company, Inc. ("Lard") and/or any of its subsidiaries and affiliated entities, each subsidiary and affiliated entity may be referred to as a ("Seller") are subject to the following terms and conditions.

- 1. Purchaser certifies all purchases are made for business/commercial purposes. All amounts due for goods and services purchased from Seller are payable at the Seller's office in Denham Springs, Louisiana. Purchaser acknowledges that such amounts are not payable in installments, but are payable in full within thirty days of the date of the purchase, unless otherwise expressly set forth in writing by Seller.
2. As set forth above, unless otherwise expressly set forth in writing by Seller on a particular invoice or other written document signed by Seller, all amounts due for purchases are due and payable within 30 days of the date of the purchase of the goods and services.
3. Purchaser shall pay Seller a service charge in an amount equal to the greater of \$25.00 or 5% of the payment balance for all payments returned by Purchaser's bank, whether returned (i) "NSF," (ii) for insufficient funds, or (iii) otherwise.
4. Purchaser further agrees that if any payment is delinquent, Purchaser's entire balance due to Seller shall, at Seller's option, be accelerated and become immediately due and payable in full.
5. In the event the Purchaser's account is turned over to an attorney for collection by suit or otherwise, Purchaser shall pay all reasonable attorney's fees and court costs incurred by Seller, as well as interest on the entire outstanding balance due at the rate equal to the lesser of (a) 18% per annum from the date due until paid in full or (b) the maximum lawful rate, if any, permitted to be charged under the applicable state's law.
6. Purchaser shall notify Seller by certified mail of any change of ownership of Purchaser. Purchaser warrants to Seller that all financial information furnished and to be furnished pertaining to the credit and financial responsibility of Purchaser is accurate and correct.
7. By receiving or using any Fuel IT cards of Seller, Purchaser hereby accepts the obligation and responsibility for full payment for all purchases through the use of account number(s) assigned to Purchaser, whether through the Mannatec, Voyager, or NBS systems.

Signature: [Signature]

Signature of Principal: [Signature]

Print Name & Title: [Signature]

Print Name of Principal: [Signature]

Purchaser/Business Name

(Name must be same as Purchaser/Business Name on front page): [Signature]

Date: [Signature]

WITNESSES: (REQUIRED AT TIME OF SIGNING CREDIT APP):

Signature: [Signature]

Signature: [Signature]

Print Name: [Signature]

Print Name: [Signature]

SECTION 8. PERSONAL GUARANTY **REQUIRED FOR: SOLE PROPRIETORSHIPS; PARTNERSHIPS; LLC'S AND CORPORATIONS

The undersigned below individually and in solido (jointly and severally) with each other guarantor and the Purchaser (identified in the above Agreement), personally guarantee prompt payment of any and all obligations of the Purchaser to Lard Oil Company, Inc. and each other Seller (identified in the above Agreement), whether now existing or hereinafter incurred, and I/we further agree and bind myself/ourselves to pay on demand any sum which is due by the Purchaser to any and every Seller. It is understood that this guaranty shall be (and is) an absolute, continuing and irrevocable guaranty for any such indebtedness and/or obligation, (whether present and/or future) of the Purchaser, including all delinquency charges, interest costs and fees (the "guaranteed indebtedness").

I / We expressly waive division, discussion, presentment, demand, protest, notice of protest, dishonor, diligence, notice of default or nonpayment, notice of acceptance of this guaranty, notice of the extending of any guaranteed indebtedness notice of any renewal or extension of any such guaranteed indebtedness of the Purchaser, and consent to the release of any other guarantor and the release of any collateral, all without diminishing or otherwise affecting this

If the guaranteed indebtedness is not paid when due, and this guaranty is placed in the hands of an attorney for collection, adjustment or compromise by suit or otherwise. I / we shall pay all reasonable attorneys' fees and court costs incurred by Seller.

Seller is expressly authorized to obtain credit reports and otherwise conduct an investigation into my/our credit history and/or creditworthiness. This guaranty shall be interpreted and enforced under the internal laws of the State of Louisiana.

In the event more than one party executes this Guaranty as a guarantor, then each guarantor agrees to be solidarily (jointly and severally) liable for the guaranteed indebtedness, and, in all instances herein, the singular shall be construed to include the plural.

GUARANTOR:

CO-GUARANTOR:

Signature: [Signature]

Signature: [Signature]

Print Name: [Signature]

Print Name: [Signature]

Home Street Address: [Signature]

Home Street Address: [Signature]

Home City, State & Zip: [Signature]

Home City, State & Zip: [Signature]

Date: [Signature]

Date: [Signature]

WITNESSES: (REQUIRED AT TIME OF SIGNING CREDIT APP):

Signature: [Signature]

Signature: [Signature]

Print Name: [Signature]

Print Name: [Signature]

AUTHORIZATION AGREEMENT FOR PRE-ARRANGED PAYMENTS (DEBITS) - "Easy Pay" Payment Plan
NOTE: Please attach a voided check for the bank account identified below

Business Name (or Sole Proprietor Name): _____ (hereinafter called "CUSTOMER")

CUSTOMER Federal Tax Identification #:

CUSTOMER (Area Code) Fax #:

CUSTOMER hereby authorizes Lard Oil Company, Inc., hereinafter called "COMPANY", to indicate debit and credit entries to the checking account indicated below and the Bank named below, hereinafter called "BANK", to debit or credit the same to such account.

BANK Name: _____ Branch: _____

BANK Address:

City, State Zip:

BANK Transit / ABA #: _____ Bank Account #: _____

This authority may be terminated upon thirty (30) days prior written notification of its termination from CUSTOMER to the COMPANY. Termination shall not affect debit or credit entries initiated prior to receipt of such notice. Similarly, CUSTOMER may transfer this authority to another CUSTOMER account upon thirty (30) days prior written notice to the COMPANY. If an erroneous debit entry is initiated by COMPANY TO CUSTOMER's account, CUSTOMER shall have the right to have the amount of such entry corrected by giving written notice of such error to COMPANY within thirty (30) days following the date on which BANK sends to CUSTOMER a statement of account or written notice pertaining to such entry. Upon receiving notice of such error, COMPANY will initiate an offsetting credit. If any debit to CUSTOMER'S account should fail to be honored by BANK due to insufficiency of the available funds, COMPANY shall be entitled to recover from CUSTOMER all fees and charges imposed by BANK by reason thereof and CUSTOMER shall forfeit any discount or other allowance applicable to the transaction(s) giving rise to such dishonor. Any such occurrence of dishonor may result in termination of CUSTOMER's credit. All credit and other terms and provisions between CUSTOMER and COMPANY shall remain in full force and effect.

CUSTOMER Name:

Signed: _____ Date Signed: _____

By (Printed Name): _____ Title: _____

***PLEASE ATTACH VOIDED CHECK HERE**

OFFICE USE ONLY:

- Master File (Payment Type) EFT Module Capital One
- TG _____ TG _____ VL _____