North Pacific Fuel

Commercial Credit Application

Business Name _____ Phone _____ Fax _____

If Vessel Account, Official Vessel Number _____

Home Port _____

Mailing Address _____

Physical Address _____

Federal Tax I.D. # _____ Are P.O's required? _____ AP Contact _____

Do you want to receive invoices and statements by email? Yes☐ No☐

Email address to send invoices/statements _____

How many years doing business under present name? _____ Type of Organization _____

Amount of Monthly Desired Credit _____ Tax Exempt Status _____

If Sole Proprietor or Partnership: (Please provide a copy of the partnership resolution)

Name _____ Phone _____

Address _____

Name _____ Phone _____

Address _____

If Corporation: (Please provide a copy of the corporate resolution)

State of Incorporation _____ Date of Incorporation _____

Date Registered in Alaska (if out of state) _____

Alaska Agent _____ Phone _____

Address _____

President _____ Phone _____

Address _____

Persons Authorized to Purchase on Account:

_____

_____

_____

Account Agreement

I promise that everything stated in this application is correct to the best of my knowledge. I agree to furnish accurate financial statements upon request. And, I authorize you to obtain credit reports in connection with this application. I also promise to pay for all charges billed for goods and services per invoice terms. Late payments will be accessed a finance charge. If this account becomes delinquent and is assigned to a collection agency, a collection fee will be added to the balance of the account and charged to me.

By _____ Title _____ Date _____

By _____ Title _____ Date _____