



BOX #300 BOYLE, T0A 0M0

(780) 689-3931 (866) 627-5170



www.greenleaffuel.com

CREDIT APPLICATION

CHECK OFF ONE OF THE FOLLOWING: APPLYING FOR:

BUSINESS SOLE PROPRIETORSHIP INDIVIDUAL

Registered Company Name or Sole Proprietorship or Full Name: _____

Operating as: _____ AB Farm # or TEFU # _____

Carbon Tax Exemption Certificate if Yes please provide certification: pricing@greenleaffuel.com

If application is required http://www.finance.alberta.ca/publications/tax_rebates/fuel/forms/IN342.pdf

Head or Home Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Phone: _____ Fax: _____ Cell: _____ Email: _____

Type of Business: _____ Years in Business: _____

Name of Principal/Officers of Company: _____ Title: _____

Home Address: _____ Phone #: _____

Name of Principal/Officers Of Company: _____ Title: _____

Home Address: _____ Phone #: _____

SOLE PROPRIETORSHIP & OR PERSONAL ADDITIONAL INFORMATION

Date of Birth: _____ SIN (Optional): _____ - _____ - _____ Gross monthly income: \$ _____

Rent or Own Monthly rent \$ _____ or Mortgage \$ _____

CREDIT INFORMATION

Current Fuel Supplier: _____

Account #: _____ Phone #: _____ Fax #: _____

Other Credit Established Vendor/Reference Name: _____

Account #: _____ Phone #: _____ Fax #: _____

Bank Institution Name: _____ Account # (Required): _____

Branch Address: _____ Branch Phone #: _____ Fax #: _____

Estimated Monthly Fuel Purchases \$: _____ Estimated Fuel Volume Monthly: _____

INVOICING, BILLING AND ACCOUNT CONTACT REQUIRMENTS

Please indicate your billing delivery method by entering your email or fax number in the fields provided below.

[] Email: _____ **(Preferred Method)**

[] Mailing Address: _____ Town/City: _____

Province: _____ Postal Code: _____

[] Fax: _____

Accounts Payable Contact Person: _____ Phone: _____ Email: _____

Current Financial Statements and/or some form of security and Electronic Payment Terms may be required.

The undersigned (i) certify the information completed herein to be true and correct; (ii) request a Green Leaf Fuel card, and renewal or replacement thereof from time to time; (iii) agree to be bound by the Green Leaf Fuel Card Terms and Conditions, Safety & Operating Rules, and Electronic Funds Transfer conditions, all available at Boyle Site; (iv) consent to Green Leaf Fuel obtaining from, exchanging with, or disclosing to third parties any and all information concerning the Applicant, (and the authorizing officer for a Company account if applicable), for the purpose of verifying the accuracy of this application, assessing financial status and credit worthiness, and allow Green Leaf Fuel and its affiliates to participate in the financing activities, such as receivable sales or securization; and (v) agree that each Applicant (and the principals of the Company if applicable) will be liable jointly and severally for all charges and indebtedness incurred through use of a Card issued to the co-applicants. Interest charges will be assessed automatically to overdue accounts at a rate of 2% per month.

Individual's Signature: _____ Position: _____ Date: _____

Individual's Signature: _____ Position: _____ Date: _____

Company: _____ Per: _____ Print Name: _____

PLEASE EMAIL COMPLETED FORM TO pricing@greenleaffuel.com or fax (866)627-5170