



CONSUMER CREDIT APPLICATION

BIG RIVER OIL CO., INC.
 D. B. GRAY OIL CO.

Name: _____ Social Security No. _____

Mailing Address: _____
(Street) (City) (State) (Zip)

Years at this address: _____ Own/Rent Drivers License _____

Any Additional Delivery Addresses _____
No. State

Telephone: Home _____ Work _____ Cell _____

Email Address: _____ Email Invoices Y / N

Are there any members of the household 62 years or older or a Veteran? Y / N

AT THIS TIME I PREFER TO PAY AT TIME OF SERVICE OR BEFORE

Employer: _____
(Name) (Address)

How long employed? _____ Have you filed bankruptcy? Y / N If yes, year _____

Written a check with insufficient funds? Y / N

Spouse Name: _____ Social Security No. _____

Spouse Employment: _____

E-MAIL ADDRESS: _____

Bank Name/Branch/Address: _____

Fax No.: _____ Contact Person: _____ Phone: _____

Joint Account: Yes/No Monthly credit requested: \$ _____

E-MAIL ADDRESS: _____

CREDIT REFERENCE: _____ Fax Number: _____
Name

ADDRESS: _____ Telephone: _____

E-MAIL ADDRESS: _____

CREDIT REFERENCE: _____ Fax Number: _____
Name

ADDRESS: _____ Telephone: _____

E-MAIL ADDRESS: _____

CREDIT REFERENCE: _____ Fax Number: _____
Name

ADDRESS: _____ Telephone: _____

E-MAIL ADDRESS: _____

References to include three (3) local business references OTHER THAN gas stations, national retail chains, banks, savings and loans, credit unions, credit cards and utilities. **BILLING INFORMATION. TERMS:** Lubes and fuel – Net 30 days. Propane – Net 30 days. Kardlock – Net 10th prox. You must retain your copy of the charge ticket presented to you at the time of purchase. **ALL CHARGES MUST BE PAID FROM ORIGINAL INVOICE.** Monthly statements are only sent upon request. 1 1/2% per month finance charge on unpaid balance. ANNUAL PERCENTAGE RATE 18%. **CREDIT IS TERMINATED IMMEDIATELY IF ACCOUNT BECOMES DELINQUENT.** If credit is granted, customer agrees to pay all legal and collection costs pertaining to the collections of this account should that become necessary. FURTHERMORE, by signing this agreement customer is approving the release by above credit references of all credit information necessary for credit approval. The customer also acknowledges they gave been given the privacy policy and safety information associated with the type(s) of services rendered. **BACK MUST ALSO BE READ AND SIGNED.**

PLEASE CHECK THE SERVICE(S) FOR WHICH YOU WOULD LIKE CREDIT APPROVAL:

PROPANE _____ Own Your Own Tank? Y / N LUBES: _____
KARDLOCK _____ (NO. OF CARDS REQUESTED _____)
FUEL _____ (ESTIMATE OF GALLONS USED MONTHLY _____)

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SIGNATURE PRINT NAME DATE

*****FOR OFFICE USE*****

APPROVED \$ _____ DENIED _____ BY _____ DATE _____

THIS AGREEMENT made and entered into this _ day of _____
20____, by and between **BIG RIVER OIL CO. / D. B. GRAY CO.** a Missouri Corporation, hereinafter
referred to as the Dealer, and _____, hereinafter referred to as the
Customer, WITNESSETH:

Whereas the customer desires to have extended credit for purchase of gasoline, oil, filters,
propane, diesel and supplies from the Dealer and desires that credit be extended on the signature of
officers, agents, servants, and employees of customer.

Now, therefore, be it agreed that the dealer agrees to extend credit as requested by the customer
and will accept until notified to the contrary, in writing, the signature presented for credit by such persons
who have the authorization and approval of the customer to sign for credit.


The customer agrees to pay all accounts per terms on reverse, and in consideration of the
extension of credit agrees to indemnify and hold harmless the dealer of any loss, damage or expense
resulting from this extension of credit.

Mailing by ordinary mail with postage prepaid to the customer shall be sufficient evidence of the
extension of credit. Any objection to the accuracy of the account or validity of signatures of the officer,
agent, servants, or employees of the customer shall be made within ten (10) days after receipt of the
account. Failure to object in writing specifying any objection shall be conclusive evidence of the accuracy
of the billing and authorization of the purchaser to act for the customer.

This agreement is binding to the heirs, executors, administrators, and successors of the parties
hereto on the day and year first above written.

AT THIS TIME I PREFER TO PAY AT TIME OF SERVICE OR BEFORE

DEALER: BIG RIVER OIL CO.

CUSTOMER: _____ 

BY: _____

BY: _____

Title: _____

Print Name: _____

Return form by:

Mail
1920 Orchard Avenue
Hannibal, MO 63401

or

Fax
(573) 248-1132
(573) 221-1640

or

E-mail
ap@bigrivercompanies.net
ar@bigrivercompanies.net