



APPLICATION FOR CREDIT:

DATE: __/__/____

LEGAL NAME: _____

DOING BUSINESS AS: _____

DUNS NUMBER: _____ FEIN: _____

PHONE: _____ FAX: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

WEBSITE: _____

BILLING ADDRESS:

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

ACCOUNT PAYABLE CONTACT: _____

PHONE: _____ EXT: _____ FAX: _____

EMAIL: _____ WEBSITE: _____

REQUIRE PURCHASE ORDERS? Yes / No

TYPE OF BUSINESS:

(PLEASE CHECK ONE)

SOLE PROPRIATORSHIP _____ INCORPORATED _____ LLC _____

LC ___ LP ___ PARTNERSHIP ___ OTHER: _____

TYPE OF BUSINESS: _____

COMPANY OFFICERS/OWNERS:

NAME: _____ TITLE: _____

SSN: _____ DOB: _____

ADDRESS: _____ CITY : _____

STATE: _____ ZIP: _____ HOME PHONE: _____

NAME: _____ TITLE: _____

SSN: _____ DOB: _____

ADDRESS: _____ CITY : _____

STATE: _____ ZIP: _____ HOME PHONE: _____

NAME: _____ TITLE: _____

SSN: _____ DOB: _____

ADDRESS: _____ CITY : _____

STATE: _____ ZIP: _____ HOME PHONE: _____

BANKING REFERENCE:

BANK NAME: _____ PHONE: _____

ACCOUNT NUMBER: _____

CONTACT: _____ PHONE / EXT: _____

TRADE REFERENCES:

1. NAME: _____ ACCOUNT#: _____

PHONE: _____ FAX: _____

2. NAME: _____ ACCOUNT#: _____

PHONE: _____ FAX: _____

3. NAME: _____ ACCOUNT#: _____

PHONE: _____ FAX: _____

To Whom It May Concern:

I (We) authorize any person, trade reference or financial institution have information as to the above name organization/company or individual to release financial information and credit information to Grease Masters LLC., it's assignee's and /or successors including, but not limited to, credit agencies and other affiliates.

COMPANY: _____ DATE: _____

BY: _____ TITLE: _____

It is finally agreed that should legal action become necessary to enforce any of the terms stated in this agreement, the laws of the State of Missouri shall apply and venue of any action commenced herein will be made in the County of St Charles, State of Missouri.

SIGNATURE: _____ DATE: _____

This application can be submitted online by clicking the "Submit Now" button.

Or, if you prefer, you can mail or fax your application.

Grease Masters LLC.
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Fax: 636-916-3147