

 1825 W. Collins Ave., Orange, CA 92863-5765 • PO Box 5765, Orange, CA 92863-5765 • (800) 984-5823 • FAX (714) 922-7313 • www.sclubricants.com

 7954 Dagget Street, San Diego, CA 92111 • (858) 277-3822 • FAX (858) 277-7361
 992 Hensley Street, Richmond, CA 94801 • (800) 808-5823 • FAX (510) 215-4194

 145 Via Vera Cruz San Marcos, CA 92078 • (760) 744-5441 • FAX (760) 744-5024
 1321 Distribution Way Vista, CA 92081 • (760) 599-9572 • FAX (760) 599-0417

BUSINESS INFORMATION

This will give authorization to release any informa Southern Counties Oil Co. Ltd., Cardlock Fuels S Signature		ormation will be kept str			Counties Lubricants, LLC,	
Legal Name of Company		Tele	ohone#	Fax#	E-Mail	
Main Business Activity		Years ir	Business Re	sale End User	SIC Code	
Company's Current Address	City	State	Zip	How Lor	ng At This Address?	
Billing Address, If Different	City	State	Zip	Telepho	ne	
Have you ever filed for Corporate Bankruptcy?	Yes No	If so, when an	d what Chapter?			
Check one of the following:						
Proprietorship Partnership		Corporation Nor	Profit Fo	ederal ID#		
	BUSINESS B	ANK INFORM	ATION			
Primary Bank	Address	City		State	Zip	
Bank Contact Person/Phone#	Fax#		Account	Type & Number:		
Secondary Bank	Address	City		State	Zip	
Bank Contact Person/Phone#	Fax#		Account Type & Number:			
	CREDIT	REFERENCES	S			
Business Name	Address	City	State	Phone#	Fax#	
Business Name	Address	City	State	Phone#	Fax#	
Business Name	Address	City	State	Phone#	Fax#	
	PRINCIPALS	OF THE COM	PANY			
Name			SS#			
Home Address					Zip Code	
Home Phone	Driver's Lic	. #		Date of Birth		
Previous Address						
Personal Net Worth	Have you e	ever filed for Personal Ba	ankruptcy?			
If so, when and what chapter?						
I certify tht I am the person named above and that	the foregoing is true and corr	ect. As a principal of				
, I auth	orize and request The Compa	anies to consider my per	sonal credit in con	njunction with this a	pplication for my	
company's account.		[X]				
				Signatur	e	
Name			SS#			
Home Address	City/St		Zip Code			
Home Phone	Driver's Lic	. #		Date of Birth		
Previous Address						
Personal Net Worth		ever filed for Personal Ba	ankruptcy?			
If so, when and what chapter?						
I certify tht I am the person named above and that	the foregoing is true and corr orize and request The Compa					
, rautr	onze and request the Compa	anes to consider my per		junction with this a	ppiloalion for my	

[X]

AGREEMENT TO PAY CHARGES

To induce one or all of The Companies to grant financial accommodations to or permit charging of products by or extend credit to or otherwise become the Creditor of _____

Herein after called "the Customer," the undersigned hereby personally guarantees to The Companies the payment, when due, of every claim (including but not limited to service charges, reasonable attorney's fees and costs) of The Companies against the customer. This is a continuing guaranty and shall remain in full Force until written revocation from the undersigned is actually received by The Companies, but such revocation shall be effective only as to claims of The Companies that arise out of transactions entered into after its receipt of such notice. Notwithstanding the full payment of any claim or receipt of any revocation, This guaranty shall remain in full force and effect or be reinstated with respect to claims against the Customer if the Customer files for bankruptcy protection, or in any court proceeding an order or judgment is entered compelling The Companies to return or refund any amount of payment made with respect to the claims. Further the undersigned agrees to and hereby does waive any and all right to subrogation against the Customer for monies paid to The Companies under this Agreement or any other binding the undersigned or the Customer. Customer and the undersigned certify that the delivery location is unbranded and will immediately notify the Companies of any change in writing by certified mail.

The Customer and the undersigned agree to pay all charges within ten (10) days for Fuels and thirty (30) days for Lubes of the date of delivery and, in the event said charges are not so paid, then the Undersigned agrees to pay The Companies a service charge of 2% per month on the unpaid balance for all charges not paid within terms. This is not interest on a loan or a finance charge, but an agreed to service charge for the failure to timely pay for goods and services received. The Companies may, at their option, refuse to permit charges to be incurred on the account. Delivery of products to the undersigned's facilities or trucks may be made without obtaining signatures upon delivery. Delivery times are "best efforts" only. The companies will not be responsible for any claims or damages whatsoever for failure(s) to deliver at certain times. The customer and the undersigned agree that if the account is referred for collection to any attorney, the undersigned will Pay reasonable attorney's fees and costs of collection. It is understood and agreed that all sales, billing, and processing of accounts receivables, applications and Credit and performance of this Agreement is entirely in Orange County, California. Thus, only the laws of the Sate of California shall apply to interpretation of the Agreement. Orange County is the only proper venue for litigation filed by either party. We further covenant and agree, if suit or litigation is filed by either party to this Agreement, the Municipal or Superior Courts of Orange County, California retain both in rem and in personam jurisdiction over us and all our assets.

Signature

Please Print Name

ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION AGREEMENT

We hereby authorize The Companies and each of its successors and assigns and all of its divisions and other subsidiary companies to initiate debit entries to my (our) checking account indicated below and the depository named below (hereinafter called "Depository") to debit the same to such account. This is a binding Agreement that may be executed by facsimile.

DEPOSITORY	BANK NAME	TELEPHONE				
	BANK ACCOUN	IT #ABA# (Routing#)				
Manner as to affor		effect until The Companies and Depository have received written notification from me (us) in such time and itory a reasonable opportunity to act on the notification. This agreement allows The Companies to charge debits mounts.				
CUSTOMER NAM	1E					
PHONE		FAX				
[X] Author	rized Signature	DATE				
AT	TTACH VOIDED CHECK	John Doe 1234 PAY DATE ORDER oF \$				
Fax	Fax#:	Attn:				
E-Mail						
P.O. Required:	- No E	Each Order Blanket P.O.				