



# Johnson Oil Company

1113 E. Sarah Dewitt Drive  
 Gonzales, TX 78629  
 Phone: (800) 284-2432  
 Fax: (830) 672-6659

SALES REP FAX # \_\_\_\_\_

Sales Representative	Account Number
Date	Terms
Credit Limit	Approved by:

Official Use Only

## CREDIT APPLICATION

APPLICANT'S BUSINESS NAME (DBA if applicable)		Phone	
STREET ADDRESS		CITY	STATE ZIP
MAILING ADDRESS		FAX	EMAIL
City:	State:	ZIP Code:	Cell #:
Date Business Commenced	Sole Owner	Partnership	Corporation
Sales Tax #	Fed ID #	Duns #	A/P Contact

## PRINCIPALS INFORMATION REQUIRED TO PROCESS THIS APPLICATION AND COD ACCTS

Principals Name:			Title		
Street address			City		State Zip
Home: Own Rent	Home Phone #		Social Sec #		DOB:
Principals Name:			Title		
Street address			City		State Zip
Home: Own Rent	Home Phone #		Social Sec #		DOB:

## CREDIT REFERENCES REQUIRED FOR CREDIT ACCOUNTS (OR ATTACH PREPRINTED SHEET)

Company Name			Contact		
Street address			City		State Zip
Phone	Fax		Email		Account #
Company Name			Contact		
Street address			City		State Zip
Phone	Fax		Email		Account #
Name of Bank			Contact		
Street address			City		State Zip
Phone	Fax		Account #		Secondary Account #

The above information is for the purpose of obtaining credit and is warranted to be true. I acknowledge that the owner(s) and/or company's consumer credit file may be requested from a credit reporting agency in order to establish credit with Johnson Oil Company. The undersigned hereby authorizes the above listed references to release such information as necessary to establish credit with Johnson Oil Company. I/We further agree and stipulate that this contract is made, entered into, and enforceable in Gonzales, Gonzales County, Texas and that all questions concerning the validity, interpretation, or performance of any contract terms or provisions, or of any rights or obligations of the parties hereto, shall be deemed to have arisen in Gonzales County, Texas and shall be governed by and resolved in accordance with the laws of the State of Texas. I/We consent to such venue in Gonzales County, Texas and waive the right, if any, to assert venue in any other state or county. All bills and invoices not paid within the designated time period shall be considered past due. As further consideration for the extension of credit, I/we agree that all past due account will be subject to a **finance charge of 1 1/2 % per month**. The undersigned agrees to pay all collection costs, court costs, and legal fees incurred to collect delinquent balances. **Further I/we hereby authorize the Company to query the references listed regarding my/our credit history and financial responsibility.**

**Personal Guarantee**

The undersigned does hereby personally and unconditionally jointly and severally guarantee to Johnson Oil Company, or its assigns, the payment of such sum or sums of money as is now or may hereafter become due from said applicant to Johnson Oil Company, or any affiliated or related company for goods, wares, merchandise and services sold to the applicant. This guaranty shall not be impaired by any extension of time or forbearance granted to the applicant with respect to any credit now outstanding or hereafter extended to the applicant. This guaranty is made without any limitation as to duration or amount and shall be a continuing guaranty covering all purchases and for interest at the maximum rate allowed by law and any other charges from the date hereof and shall remain in full force and effect unless especially revoked by personal notice by each guarantor in writing (letter should be sent certified and registered to Johnson Oil Company, Attn: Credit Department, P. O. Drawer 1959, Gonzales, Texas 78629), which revocation shall apply only to indebtedness contracted after date of receipt by Johnson Oil Company of such notice of revocation. I understand that an individual credit report may be required. I agree to pay interest and reasonable attorney's fees as allowed by law if it becomes necessary to enforce this guaranty by suit.

OFFICER/OWNER NAME \_\_\_\_\_ OFFICER/OWNER NAME \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

**PLEASE MAIL ORIGINAL TO: PO BOX 1959 GONZALES, TX 78629, ATTN: KIM BRATCHER**