



22797 Highway 15  
P.O. Box 1810  
Ferriday, LA 71334  
Phone: 318-757-7610

**DELTA FUEL COMPANY, INC.**  
**APPLICATION FOR CREDIT**  
**Fax Numbers**

Ferriday, LA (318) 757-6742  
Tallulah, LA (318) 574-2250  
St. Joseph, LA (318) 766-3985  
Winnsboro, LA (318) 435-9197  
Sicity Island, LA (318) 389-5355  
Rayville, LA (318) 728-2687  
Crowville, LA (318) 722-3726  
Natchez, MS (601) 445-0026

**This is not a commitment to lend. All applicants are subject to approval by Delta Fuel. Please phone 318-757-7610 (Victoria Ganey Bourke) if you have any questions regarding this matter.**

Branch Affiliation (circle one) Ferriday St. Joseph Tallulah Winnsboro Sicity Island Rayville Natchez Shreveport Midland

You must complete all areas marked with an (\*)

\*Date \_\_\_\_\_

\*Applying as Corporation \_\_\_\_\_ LLC \_\_\_\_\_ Partnership \_\_\_\_\_ Individual \_\_\_\_\_ Registered Farmer \_\_\_\_\_

\*NAME OF APPLICANT \_\_\_\_\_

\*Physical Address \_\_\_\_\_ \*City, State Zip \_\_\_\_\_

\*Mailing Address if Different than Physical Address \_\_\_\_\_

\*Phone 1 (\_\_\_\_) \_\_\_\_\_ \*Fax (\_\_\_\_) \_\_\_\_\_ \*E-Mail \_\_\_\_\_

\*Name of Applicant's Contact Person For Account Matters \_\_\_\_\_

**Please complete if you are applying as Individual or Farmer**

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_ Driver License \_\_\_\_\_ Farm No. \_\_\_\_\_

**Please complete if you are applying as any type of Business**

Trade Name(s) (if any) \_\_\_\_\_ Tax ID # or SS # \_\_\_\_\_

Description of Business \_\_\_\_\_ Date Business Established \_\_\_\_\_

State of Organization \_\_\_\_\_ D&B Rating (if any) \_\_\_\_\_

**IDENTIFY ALL MEMBERS, MANAGERS, OFFICERS OR PARTNERS**

1. \_\_\_\_\_ Title \_\_\_\_\_ SS# \_\_\_\_\_ Home Address \_\_\_\_\_

2. \_\_\_\_\_ Title \_\_\_\_\_ SS# \_\_\_\_\_ Home Address \_\_\_\_\_

3. \_\_\_\_\_ Title \_\_\_\_\_ SS# \_\_\_\_\_ Home Address \_\_\_\_\_

\*Has Applicant ever been denied credit in the past? Yes \_\_\_ No \_\_\_

\*If yes, please identify each and every instance and give an explanation for the denial. \_\_\_\_\_

*If additional pages are needed please attach separately with Application*

\*Are there any suits, judgments, garnishments or other legal proceedings pending against Applicant or have any of Applicant's debts ever been turned over to a collection agency? Yes \_\_\_ No \_\_\_

\*If yes, please identify each and every instance and explain. \_\_\_\_\_

*If additional pages are needed please attach separately with Application*

\*Has Applicant ever filed a petition in bankruptcy or had a petition in bankruptcy filed against it? Yes \_\_\_ No \_\_\_

\*If yes, please identify each and every petition, giving the location of the bankruptcy. \_\_\_\_\_

*If additional pages are needed please attach separately with Application*

\*Is Applicant sales tax exempt? Yes \_\_\_ No \_\_\_

\*If yes, please attach a copy of your exemption certificate(s) stating the rule(s) applicable and listing your tax number.

**FINANCIAL INFORMATION**

\*Contact Name: \_\_\_\_\_

\*Name of Banking Institution \_\_\_\_\_ Account No \_\_\_\_\_ \*Phone (\_\_\_\_) \_\_\_\_\_

\*Address \_\_\_\_\_ \*City, State Zip \_\_\_\_\_ \* Fax (\_\_\_\_) \_\_\_\_\_

**TRADE REFERENCES**

\*(1) Company Name \_\_\_\_\_ Contact Name \_\_\_\_\_

\*Address \_\_\_\_\_ \* Phone (\_\_\_\_) \_\_\_\_\_ \*Fax (\_\_\_\_) \_\_\_\_\_

\*(2) Company Name \_\_\_\_\_ Contact Name \_\_\_\_\_

\*Address \_\_\_\_\_ \* Phone (\_\_\_\_) \_\_\_\_\_ \*Fax (\_\_\_\_) \_\_\_\_\_

\*(3) Company Name \_\_\_\_\_ Contact Name \_\_\_\_\_

\*Address \_\_\_\_\_ \* Phone (\_\_\_\_) \_\_\_\_\_ \*Fax (\_\_\_\_) \_\_\_\_\_

**CREDIT REQUEST INFORMATION (If approved for a Delta Fuel account.)**

\*Desired Credit Limit \$ \_\_\_\_\_ \*Number of Cards Requested \_\_\_\_\_ \*Desired Pin Nos. \_\_\_\_\_

Applicant certifies that all information contained in this application is true and correct. Applicant hereby grants Delta Fuel permission to verify all information in this application from any source Delta Fuel deems appropriate, including, but not limited to, obtaining oral or written information from Trade References and Financial Institutions identified on this Application, and such other persons or entities as Delta Fuel deems appropriate, about Applicant’s credit history and performance. Applicant hereby grants all present and former creditors of Applicant permission to disclose any and all information about Applicant’s credit history and performance to Delta Fuel. Applicant hereby grants Delta Fuel permission to obtain credit reports from any credit reporting agency concerning Applicant from time to time and for such purposes as Delta Fuel deems appropriate including, without limitation, to assist Delta Fuel in making a credit decision, to review the account of Applicant, and to assist in collection activity. At Applicant’s request, Delta Fuel will disclose to Applicant the name and address of any credit reporting agency from which Delta Fuel received Applicant’s credit report. Applicant further hereby authorizes Delta Fuel to disclose and provide to any current, former or prospective creditors of Applicant, for whom Applicant has identified Delta Fuel as a Trade or Credit reference, any information requested about Delta Fuel’s credit experience with Applicant.

Applicant understands and agrees that in the event Delta Fuel extends credit to Applicant, Applicant shall pay the full amount of each invoice for Delta Fuel products, services or equipment within thirty days of the date Applicant receives each such invoice, or on such terms as agreed in a separate written contract executed by Applicant and Delta Fuel. Applicant understands and hereby agrees that if any invoice is not paid in full on or before the due date Applicant shall be deemed to be in default and the entire balance of Applicant’s credit account shall be immediately due and owing to Delta Fuel. In the event Applicant fails to timely make a payment due on its account, Applicant hereby agrees to pay finance charges on all unpaid account balances at the rate of one and one-half percent (1½%) per month (18% APR) from due date until paid in full. Further, if Applicant’s account is placed for collection, Applicant hereby agrees to pay all costs of collection, plus an additional twenty-five percent (25%) of all amounts due, including interest, as reasonable attorney’s fees. Applicant hereby agrees to pay Delta Fuel a service charge of \$25.00 for each returned check. Applicant acknowledges that any goods returned by credit may be subject to a restocking charge. Applicant also hereby agrees that jurisdiction and venue for any collection proceeding, or an action arising out of this Agreement, shall lie solely in the Courts of Concordia Parish, Louisiana, regardless of any conflicts of law statutes, rules, regulations or laws.

The person signing this document as, or on behalf of, Applicant hereby certifies that they have read and understand all of the terms, conditions and obligations of this Application, they are authorized to execute this document and bind Applicant, and that Applicant agrees to all of the terms, conditions and obligations set forth in this document.

\*SIGNATURE \_\_\_\_\_ \*TITLE \_\_\_\_\_

\*PRINT NAME \_\_\_\_\_

**CONTINUING PERSONAL GUARANTY AGREEMENT (IF APPLICABLE)**

The undersigned (whether one or more, “Guarantor”) absolutely, unconditionally and solidarily guarantees the prompt payment in full of any and all indebtedness of Applicant to Delta Fuel Company, Inc., it’s subsidiaries and affiliates (collectively, “Delta Fuel”), including all interest, attorney’s fees, other fees and charges, of whatsoever nature and kind, whether due or to become due, and whether now existing or hereafter arising without requiring any notice of non-payment, demand, dishonor, or non-performance. Guarantor expressly understands and agrees that this guaranty agreement will remain in effect until written notice revoking it is delivered to Delta Fuel, and that any such revocation will only be effective as to charges incurred subsequent to such revocation. Guarantor declares that Guarantor has read this Continuing Personal Guaranty Agreement and hereby consents and agrees to its terms and conditions.

\*Guarantor \_\_\_\_\_ Date \_\_\_\_\_

\*Printed Name \_\_\_\_\_

\*Guarantor \_\_\_\_\_ Date \_\_\_\_\_

\*Printed Name \_\_\_\_\_

**FOR OFFICE USE ONLY**

Accepted / Denied	Account No.	Amount	Location	Date
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