



Corporate Office  
 420 L Street, Suite 101  
 Anchorage, AK 99501  
 907-276-2688  
 (800) 478-2688  
 Fax 1 (907) 276-3741

**PLEASE CHECK  
 SITE LOCATIONS**

- Anchorage     Naknek     Haines     Dillingham     Dutch Harbor     St. Paul Delta Fuel  
 Juneau     Yakutat     Wrangell     Reliable Oil     Bethel     St. George Delta Fuel

**CONFIDENTIAL CREDIT APPLICATION -- INDIVIDUAL ACCOUNTS**

For the purpose of obtaining credit from any DELTA WESTERN, INC. AND/OR JOINT VENTURE ("SELLER"), APPLICANT makes the following statements with the intent that SELLER relies on them as correct. APPLICANT agrees to advise SELLER if any information changes.

Applicant's Name: \_\_\_\_\_ Co-Applicant's Name: \_\_\_\_\_  
 Applicant's Social Security #: \_\_\_\_\_ Co-Applicant's Social Security #: \_\_\_\_\_  
 Home Address/City/State/Zip: \_\_\_\_\_  
 Mailing Address/City/State/Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Years at Home Address: \_\_\_\_\_  
 Applicant's Employer: \_\_\_\_\_ Co-Applicant's Employer: \_\_\_\_\_  
 Employer Address: \_\_\_\_\_ Employer Address: \_\_\_\_\_  
 Employer City/State/Zip: \_\_\_\_\_ Employer City/State/Zip: \_\_\_\_\_  
 Employer Phone: \_\_\_\_\_ Employer Phone: \_\_\_\_\_  
 Years at Present Job: \_\_\_\_\_ Job Title: \_\_\_\_\_ Years at Present Job: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Yearly Income: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Yearly Income: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Indicate Fuel Use:  Home     Automobile    **Estimated Monthly Purchases: \$** \_\_\_\_\_  
 Heating Fuel Tank Capacity: \_\_\_\_\_ Location of Fuel Tank: \_\_\_\_\_

**TRADE / CREDIT REFERENCES (INCLUDING PREVIOUS FUEL SUPPLIER)**

Business Name: \_\_\_\_\_ Business Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Acct #: \_\_\_\_\_ Phone: \_\_\_\_\_ Acct #: \_\_\_\_\_

**BANK REFERENCE**

Bank Name: \_\_\_\_\_ Acct #: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address/City/State/Zip: \_\_\_\_\_ Contact: \_\_\_\_\_

I/We hereby promise to pay Delta Western, Inc. for all charges billed for goods sold and services rendered within 15 days of date of billing unless otherwise noted. I/We understand that if default occurs, deliveries may be suspended if satisfactory arrangements have not been made with the Credit Department. Default is the failure to pay the full amount of fuel oil charges within 15 days after billing unless otherwise noted. I/We hereby authorize you or any credit reporting agency employed by you to investigate the references here in listed or any of the other information stated above to determine my qualification to establish an account. I/We certify that everything I/we have stated in this application is correct to the best of my/our knowledge.

If this account becomes delinquent and is assigned to a collection agency, a 25% collection fee will be added to the delinquent balance and charged to me/us.

\_\_\_\_\_ DATE \_\_\_\_\_  
 APPLICANT'S SIGNATURE CO-APPLICANT'S SIGNATURE  
 \_\_\_\_\_ DATE \_\_\_\_\_  
 APPLICANT'S NAME (PRINTED) CO-APPLICANT'S NAME (PRINTED)