



PERSONAL ACCOUNT APPLICATION

Table with contact information for N-R South Office and N-R North Office, including phone numbers, fax numbers, and email addresses.

Check Appropriate Boxes and Provide All Information Requested

APPLICANT INFORMATION

Form section for Applicant Information containing fields for Name, Address, Phone, Birth Date, License, and Employer for both applicant and joint applicant.

ACCOUNT INFORMATION

Form section for Account Information containing fields for account type, contact person, monthly credit usage, and payment options.

BANK / TRADE or CREDIT REFERENCES

Form section for Bank / Trade or Credit References containing fields for Bank Name, Company Name, and Email for multiple references.

**NELSON-REISNER**

**ACCOUNT AGREEMENT AND TERMS OF SALE**

I understand that this Agreement and Terms of Sale will not become effective until opened by Nelson-Reisner and, if opened, I agree that the following terms will govern any charge account established by you for my use:

The Applicant hereby applies to Nelson-Reisner for credit. It is understood and agreed that the undersigned specifically consents to Nelson-Reisner investigating the Applicant's owner's, if applicable, credit history and may utilize outside credit reporting services to obtain information on the Applicant/owners. Applicant further agrees to give permission to make inquiry of financial and related matters at applicant's bank(s). All information provided on this Credit Application is warranted by the undersigned and Applicant to be complete and accurate. Nelson-Reisner shall determine the creditworthiness of the Applicant in its sole discretion, and further Nelson-Reisner may increase, decrease or terminate the credit availability to Applicant at any time within its sole discretion.

The undersigned agrees to pay for all fuel, lubricants and other products and/or services directly from our invoices as stated on each invoice or within 30 days of invoice date, whichever is lesser. The undersigned further agrees to pay a finance charge of 1.5% per month (18% per year) on all past due amounts; a handling charge of \$25 for each returned check, and all collection and legal fees. The waiver of a finance charge or any portion thereof shall not be deemed to be a waiver of any future finance charges. Should it become necessary to place the account with a collection agency or attorney for collection, Nelson-Reisner shall be entitled to all collection costs, including reasonable attorney fees and court costs.

Applicant shall provide Nelson-Reisner with at least 15 days' notice of any change in principals or any change in Applicants legal name or legal identity. The Applicant and any guarantor hereunder agree to provide Nelson-Reisner with updated financial information upon request.

Pacific Pride / CFN Terms: Applicable to card-lock (Pacific Pride/CFN) use:

1. **I understand terms to be net 15 days.**
2. I agree to pay a late charge of 1.5 % per month (18% per year) on any delinquent balances. I agree to pay all collection costs, including reasonable attorney fees and court costs, in case it is necessary to take legal action to collect on past due amounts.
3. Terms applicable to card-lock (Pacific Pride / CFN Advantage / Fuelman) use:
  - a. I will be responsible for all purchases using card-lock ("cards") issued to me, regardless of whether the use is unauthorized or fraudulent.
  - b. I understand that the card is used to initiate a Pacific Pride Advantage / CFN or Fuelman transaction, and is *not* a credit card.
  - c. I understand that my Pacific Pride Advantage / CFN card(s) will work at any site accepting Fuelman cards unless I request to be locked out.
  - d. I understand that some fuel product restrictions will not apply at sites utilizing multiple product pumps.
  - e. I understand the invoice is due in full net 15 days. I agree to pay all late and/or finance charges on delinquent balances as described above.
  - f. I agree that the automated system may automatically suspend service without notice to me should any payment not be made when due.
  - g. I assume responsibility for insuring that any person using the cards delivered to me is aware of the proper use of the card-lock system and will use safe practices in compliance with the regulations of the local Fire Code in the handling of fuels dispensed from the card-lock system. I agree to indemnify and hold Nelson-Reisner Distributor, Inc. harmless from any claims and cost including but expressly not limited to, those for bodily injury and property damage, which may be occasioned by the negligence or misuse of the card-lock system by me or any person using the cards delivered to me.
  - h. Nelson-Reisner shall use its best efforts to maintain the card-lock system in good working order and condition at its expense; provided, however, it shall not be responsible for any damage or loss which may result from its failure to provide fuel or the failure of the card-lock system in any manner whatsoever. I agree to promptly notify Nelson-Reisner of any malfunctioning of the card-lock system which comes to my attention.
  - i. I understand that my right to purchase fuel through the card-lock system may be terminated immediately upon any breach of any of the terms hereof or of any other agreement with Nelson-Reisner and may also be terminated upon **30** days notice by either party. Upon termination, I agree to immediately surrender all cards issued to me and to immediately pay all outstanding sums owing Nelson-Reisner

**I/We FULLY UNDERSTAND AND AGREE TO THE AGREEMENT AND TERMS OF SALE ABOVE AND AGREE TO THE PROPER PAYMENT IN CONSIDERATION OF CREDIT EXTENDED.**

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APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

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JOINT APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ PRINTED NAME \_\_\_\_\_

## ELECTRONIC FUND TRANSFER AUTHORIZATION AGREEMENT

### Customer Information

ACCOUNT NAME		N-R ACCOUNT NUMBER	
ADDRESS	CITY	STATE	ZIP
ACCOUNTING / EFT CONTACT NAME			
CONTACT PHONE		EMAIL ADDRESS	

We, (*Customer*) hereby authorize Nelson-Reisner, (*Company*) to originate debit or credit Automated Clearing House electronic funds transfer (EFT) entries to *Customer's* bank account indicated below for transactions due as agreed to by terms assigned.

**Terms: EFT net invoice amount on the 15<sup>th</sup> or discount date (discount given) Bank Information**

BANK NAME		BANK ROUTING NUMBER		BANK ACCOUNT NUMBER	
BRANCH		PHONE		BANK ACCOUNT TYPE CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/>	
CITY	STATE	ZIP	BANK CONTACT NAME		

This authorization is to remain in full force and effect until COMPANY has received written notification from CUSTOMER (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

All other credit, terms of sales and requirements between *Customer* and *Company* remain in effect. It is understood that this authorization is subject to credit approval by *Company*. The terms of sale in effect on this date are subject to change at any time upon notification by *Company*.

I authorize Nelson-Reisner (*Company*) to instruct my financial institution to make my payments. I also understand that I may discontinue this authorization at any time by giving written notice to *Company*.

***Please obtain the correct Transit/ABA number from your bank and attach a voided check***

### Customer Authorization

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Authorized Signature	Date
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Authorized Signature	Date
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*Please complete all information. Missing information may delay processing.*