

Commercial Credit Application

1150 Main Street, Hanson, MA 02341 Phone: 888-822-1301 | Fax: 781-294-9337 www.massstatephac.com

Company name:			Phone:		
DBA:			Fax:	Fax:	
Type of business:					
Years in business:	Federal ID#	:	No. Employees:		
Anticipated high credit needed:	(Combined	companies) Duns #			
	PR	INCIPAL OR OFFICERS			
Name		Title		Social Security#	
		BANK REFFERENCE			
		Account Officer:			
Address:		City:	State:	ZipCode:	
		RADE REFERENCES		DI.	
Compan		Contact Person		Phone	
understands that the Guaranty accompany conditions of the application and changes	conjunction with a request of open credit terms. I hereby ving this application is necessary to extend credit to appli from time to time. The undersigned further agrees that a prence to conflicts of laws principles and to pay for all lega In accordance with the terms and conditions listed	cant. If this application is accepted, i Il issues and disputes relating to an al cost plus attorney's fees.	the undersigned agrees to the terms (Sta y credit arrangement extended hereunde	ndard Terms used are Net 30 days and COD) ar r shall be governed in accordance with the lav	
Date:	Principals or Officer:		Title:		
SIGNATURE REQUIRED				ATTEST	
Ву:		Ву:	Ву:		
Signature:		Witness Si	gnature:		
Print Name:		Print Nam	Print Name:		
	:				
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remain valid and enforceable until Applicant expressly revokes authorization in writing and served to us by registered or certified mail.

NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants based on race, color, religion, national origin, or sex. The federal agency that administers compliance with this law concerning this credit is the Federal Trade Commission, Division of Credit Practices, 6th and Pennsylvania Avenue, NW, Washington, D.C. 20580. If credit is denied, the applicant has the right to a written statement of the specific reasons for denial. To obtain the statement, please contact EnergyUSA Propane, Attn: Corporate Credit Department, 100 Myles Standish Blvd. Suite 101 Taunton, MA 02780, within sixty (60) days from the date you were notified of the decision to deny credit, we will send you a written statement of reasons for denial within thirty (30) days of receiving your request for the statement of reasons(s).

FOR (COMPANY	USE ONLY
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New:	Resign:	Tank Size:	PPG:	Previous Account Name or Number:	
					CCF-10-2010